

Application Form for Individuals Seeking Regulated Work

Position applied for:		
1. Personal Details:		
Forename(s)	Surname	
Any previous name by which you've been	known	
Address:	Home Tel No	
	Mobile No	
	Email Address	
Post code:		
2. (Only if applying for paid employ	yment)	
Employers name and address	Position:	
	Date appointed:	
	Salary:	
	Additional benefits:	
	Notice required and reason for leaving:	
<u> </u>	1	

3. Previous Employment (start with most recent, if applying for an unpaid position please give details of working with children)

From - To	Employer's Name and address	Post held	Reason for leaving

(Continue on separate page if necessary)

4. Education and qualifications

From-To	Secondary Schools, Colleges, Polytechnics, Universities and other Institutions (indicate full or part-time)	Qualifications

(Continue on separate page if necessary)

5. Other training and qualifications

From-To	Please give details of any training courses (e.g., coaching courses etc) or qualifications relevant to this application	Qualifications

6. Supportin	g Statement	
job description	how you think your skills and experience match the roon and give your reasons for applying. Please inc k (with dates) and technical skills which we should kn	lude any relevant
7. Additiona	Information	
	if you feel we will need to provide any additional supple e.g. in relation to health, mental health or disability.	
8. Interview	Availability	
Please advise	e of any dates you would be unable to attend an interv	view.

9. The Vacancy

How did you learn of this vacancy?		

10. References

Please give details of two referees (preferably with first-hand knowledge of your previous work with children). References from relatives will not be accepted. Let us know if you do not want us to contact a referee prior to interview.

Name	Name
Address	Address
Postcode:	Postcode:
Tel No	Tel No
How do they know you?	How do they know you?
How long have they known you?	How long have they known you?

11. Declaration

Data Protection Act In order to recruit to the post The Scottish Archery Association will (within the terms of the Data Protection Act 1998) process personal information given in connection with this application. Information relating to the successful applicant will form part of personnel records. No other use will be made of information about applicants.

<u>Consent</u> I consent to the processing of personal information in the way described. As this role is regulated work with children, I consent to The Scottish Archery Association requesting a Scheme Record/Scheme Record Update (as appropriate) under the Protection of Vulnerable Groups (Scotland) Act 2007.

<u>Declaration</u> I declare that to the best of my knowled form is true and correct. I understand that misles omission may be sufficient grounds for cancelling an application.	ading statements or deliberate	
Signed	Date	
Child Protection Officer I confirm that I have seen the following identification name of applicant]:	documents relating to [insert	
1.		
2.		
Note: At least one form of identification must be photographic.		
Signed	Date	
Print name	Position	
Once this form has been completed, it should be with a separate sealed envelope, containing the app		

Once this form has been completed, it should be placed in an envelope, together with a separate sealed envelope, containing the applicants self declaration form, and sent to: Tracy McGarry, SAA CPO, Sunny Side Cottage, Lonmay, Fraserburgh, AB43 8ST

