

# APPLICATION FOR EMPLOYMENT

## POSITION APPLIED FOR PENSION WISE ADVISER

Airdrie Citizens Advice Bureau

**CONFIDENTIAL**

Please complete this form in **black** ink or type to enable clear photocopying.

Airdrie Citizens Advice Bureau wishes to ensure that comparison between applicants for posts is thorough, fair and in line with its Equal Opportunities Policy. It is therefore essential that you complete this application form fully as it will be used to assess whether you will be shortlisted for interview.

**SURNAME** \_\_\_\_\_ **FIRST NAME INITIAL ONLY** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_ **TELEPHONE NUMBERS**  
Day \_\_\_\_\_  
Evening \_\_\_\_\_

May we contact you at work **YES/NO**  
(Please delete)

If offered this position what notice period are you required to work? \_\_\_\_\_

Do you hold a current valid driving licence? **YES/NO**  
(Please delete)

Do you have unrestricted access to a vehicle? **YES/NO**  
(Please delete)

This question is only relevant to certain jobs: please refer to the job description

How many days have you been absent from work due to sickness in the last 3 years?

Year 1	_____	Number of days	Cause of absence	_____
Year 2	_____	Number of days	Cause of absence	_____
Year 3	_____	Number of days	Cause of absence	_____

Please state where you saw this advertisement.

Newspaper \_\_\_\_\_ Job Centre \_\_\_\_\_ Other \_\_\_\_\_



**WORK EXPERIENCE**

---

We would like to know about your work experience, paid or unpaid. Please include your current/previous employment, voluntary work, or community activities, and time spent caring for dependants, etc, if appropriate. Please begin with your most recent experience and highlight any which is particularly relevant to this post.

DATES	NAME OF EMPLOYER/ ORGANISATION	MAIN TASKS UNDERTAKEN

## EDUCATION AND TRAINING

---

EDUCATION - Please give general information on the education you have received, and highlight any which is particularly relevant to the post.

DATES	EDUCATION	QUALIFICATIONS RECEIVED

TRAINING - Please list any training which you have received, or are currently undertaking, which you consider relevant to the advertised post.

DATES	TRAINING	QUALIFICATIONS RECEIVED (if applicable)

## ADDITIONAL INFORMATION

---

In this section we would like you to give your reasons for applying for this post. Bearing in mind the job description, please indicate what experience, skills and interests you would bring to the post.

Please continue on separate sheet if required

## REFERENCES

---

Please give below the names and addresses of two referees who can comment on your suitability for the post. If you have been employed, we would normally wish to seek a reference from your present or most recent employer.

---

May we contact your present employer at this stage?    **YES/NO**  
(Please delete)

---

Name	_____	Name	_____
Position	_____	Position	_____
Address	_____	Address	_____
	_____		_____
	_____		_____
	_____		_____

**I declare the information given on this form is correct to the best of my knowledge.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return your form by email to

**Elaine Tocock**  
**Chief Executive Officer Depute**  
**Airdrie Citizens Advice Bureau**  
**61<sup>A</sup> Stirling Street**  
**AIRDRIE**  
**ML6 0AS**

**Email: [elaine.tocock@airdriecab.casonline.org.uk](mailto:elaine.tocock@airdriecab.casonline.org.uk)**

## EQUAL OPPORTUNITIES - RECRUITMENT MONITORING FORM

Post title:

The CAB is striving to ensure equality of opportunity in its employment policies and therefore we have decided to monitor our recruitment practices. This will help us identify areas of under representation in our workforce and to assess those areas where positive action is needed. In order that we can monitor each stage of the recruitment process you will be asked to complete this form on application.

Your co-operation in completing this form would be greatly appreciated. We must stress that any information you give will be strictly confidential. You are not obliged to answer the questions but you will appreciate that, for our monitoring policy to be wholly effective, we would hope to have 100% response.

If you do not wish to answer any question(s) this will not affect your application in any way. There follows an explanation of some of the sections where appropriate. Thank you for your time and co-operation in completing our form.

### 1. ETHNIC ORIGIN

Guidelines: Ethnic Origin

We appreciate that some people including those of mixed race, may not be happy with classification used on monitoring forms. The classification we have used are those currently recommended by the Commission of Racial Equality. If you wish to classify yourself in some other way, please use the additional space provided to do so.

I would describe my ethnic origin as *(in your own words or if you prefer tick one of the following)*:

White	<input type="checkbox"/>	Irish	<input type="checkbox"/>	Black-African	<input type="checkbox"/>	Black-Caribbean	<input type="checkbox"/>	Black-Other (please specify)	_____
Indian	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>	Chinese	<input type="checkbox"/>	Other (please specify)	_____

### 2. GENDER

I am *(please tick)*:      Male ☐      Female ☐

### 3. AGE

My date of birth is \_\_\_\_\_

### 4. DISABILITY

Guidelines: Disability

We understand that many employees do not declare disability because of possible discrimination against them by employers in the selection process and many people do not register as disabled for the same reason.

As many people know, the Department of Employment requires us to keep a record of how many disabled people we employ but in addition we would like to know how many people we attract to the CAB so that we can monitor the effectiveness of our policies towards disabled people.

- I do/do not have any disabilities\*
- I am/am not registered disabled\*
- I would/would not require special adaptations/equipment to take up employment\*

Please specify\_\_\_\_\_

\*If you answer in the affirmative to any of the above questions and are short-listed for interview, please contact the CAB to ensure that interview arrangements are to your satisfaction.

## 5. SEXUAL ORIENTATION

Guidelines: Sexual Orientation

We appreciate that some people may find the question on sexual orientation to be an extremely personal one and we must therefore re-iterate that you are under no obligation to answer it.

I would describe myself as *(please tick)*:

Heterosexual ☐ Lesbian ☐ Gay ☐ Bisexual ☐

## 6. MEDIA RESPONSE

Where did you see this post advertised?

## 7. COMMENTS

Do you have any comments on our monitoring form?