**Position being applied for:**

***Please note that all information given in this form will be treated in the strictest confidence***

**PLEASE PRINT IN BLOCK CAPITALS**

1. **PERSONAL DETAILS**

|  |  |  |
| --- | --- | --- |
| **Surname** |  | **Forenames** |
|  |  |  |
|  |  |  |
| **Title: Miss/Ms/Mrs/Mr** |  |  |
|  |  |  |
|  |  |  |
| **Postal Address** |  | **Home Address** (**if different)** |
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|  |  |  |
| **Telephone:** (home) |  | (daytime) |
|  |  |  |
|  |  |  |
| **National Insurance Number** |  | **Email** |
|  |  |  |

1. **DISABILITY AND ACCESSIBILITY REQUIREMENTS**

VAO is committed to making our recruitment process and workplace accessible for everyone.

Do you have a disability or long-term health condition?

Yes    No   Prefer not to say

Do you have any accessibility requirements for the recruitment process or for carrying out the role?

Yes   No   Prefer not to say

If yes, please provide details so that we can make any necessary adjustments:

*(The information provided here will be treated in strict confidence and used only to ensure that appropriate arrangements can be made to support you.)*

1. **EDUCATION:** Please indicate grades where appropriate

|  |  |  |  |
| --- | --- | --- | --- |
| **School or Institution** | **Dates** | **Full/Part Time** | **Certificates Gained or Standards Reached** |
|  |  |  |  |

1. **PREVIOUS EMPLOYMENT**

This should be a continuous record for at least the past ten year’s employment and should include any periods of unemployment.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employer** | **Post Held and Brief Description of Duties** | **Employers’ Main Activity** | **Dates** | |
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1. **PRESENT OR MOST RECENT EMPLOYMENT**

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| --- | --- | --- | --- | --- |
| **Employer** | **Post Held and Brief Description of Duties** | **Employers’ Main Activity** | **Dates** | |
|  |  |  | **From** | **To** |

|  |  |  |
| --- | --- | --- |
| **Salary:** |  | **Period of Notice Required:** |
|  |  |  |
|  |  |  |
| **Reasons for wishing to leave this employment:** | | |
|  |  |  |
| 1. **REFERENCES** |  |  |
| Please give the names and addresses of two referees, one of whom should be your present or most recent employer | | |
|  | | |
| Name |  | Name |
|  |  |  |
|  |  |  |
| Address |  | Address |
|  |  |  |
|  |  |  |
|  |  |  |
| Email: |  | Email: |
|  |  |  |
| Telephone: |  | Telephone: |
|  |  |  |
|  |  |  |
| Position: |  | Position |
|  |  |  |

**Please note that references will be requested prior to interview unless otherwise indicated**

1. **ADDITIONAL STATEMENT TO SUPPORT YOUR APPLICATION**

This is the most important section and will give us specific information in support of your application. You must be able to demonstrate that you can **satisfy each and every aspect of the person specification**. For example, if the person specification asks for ‘ability to’ or ‘commitment to’ you will be required to demonstrate positively your ability, commitment etc by reference to your academic, professional or personal experience.

|  |
| --- |
| **Please continue on additional sheets if required** |

**Signed……………………………………………………. Date……………………………….**

Please return your completed Application Form and Equal Opportunities Monitoring Form marked as confidential by email to: [hr@vaorkney.org.uk](mailto:hr@vaorkney.org.uk) or by post to:

Rosalind Aitken

Depute Chief Executive Officer

Voluntary Action Orkney

Anchor Buildings

6 Bridge Street

Kirkwall

KW15 1HR

Closing date for applications is **Friday 29 August 2025 at 5pm.**