



visibility

listening and responding to people affected by sight loss in the west of scotland

**EMPLOYMENT APPLICATION FORM
PRIVATE & CONFIDENTIAL**

PLEASE PRINT CLEARLY

Position applied for:

Where did you hear about this vacancy?

When would you be available to start?

Personal details

Full name:

Title

Forename(s)

Surname:

Home Address:

Postcode:

Home telephone:

Mobile No:

Email Address

Please Return To: **Visibility**
2 Queens Crescent
Glasgow G4 9BW

Employment

Please list past employment, including voluntary positions, beginning with your most recent job. It would be helpful if you could provide an explanation of gaps in employment history.

Name & Address of Employer				
Telephone No:		Type of Business:		
From: Month Year	To: Month Year	Starting Salary	Leaving Salary	Name of Manager
		£	£	
Job Title:				
Describe the work you did and give reasons for leaving:				
Name & Address of Employer				
Telephone No:		Type of Business:		
From: Month Year	To: Month Year	Starting Salary	Leaving Salary	Name of Manager

Job Title:				
Describe the work you did and give reasons for leaving:				
Name & Address of Employer				
Telephone No:		Type of Business:		
From: Month Year	To: Month Year	Starting Salary	Leaving Salary	Name of Manager
Job Title:				
Describe the work you did and give reasons for leaving:				

***Please continue employment history on a separate page if necessary.**



EXPERIENCE

Outline particular experience gained in previous positions or in activities outside of work that you feel show your aptitudes and skills for the position applied for. Please include any involvement with other Voluntary Sector organisations.

Interests

Give details of your main interests and the depth to which these are pursued.

Supporting Statement

Drawing from the person specification, please outline why you think you meet all requirements of this post.

References

Please provide names, addresses and occupations of two referees both of whom must be previous employers.

We will contact these referees if you are selected for interview

Please tick here to confirm this is acceptable

1st Referee

Name:

Address:

.....

Tel No

Email

2nd Referee

Name:

Address:

.....

Tel No

Email

