



Job Application Form

Associate: Associate Therapist

Fortis Therapy and Training

Please tell us how you heard about this vacancy:

1. Personal details

Last Name:

First Name:

Address:

Postcode:

Home Telephone No.

Daytime Contact No.

E-mail address:

Which Professional Body are you registered with:

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Membership No. (essential)

Driving Licence

Yes No

Do you hold a full, driving licence valid in the UK?

2. Areas of expertise

Please tick:

Primary School Children

Young People

Families

Adoption Services

Foster Care

Couples

Adults

Mediation

Coaching

3. Preferred hours

Please tick

Full time

Part time

We do like our associates to be willing to work flexibly across the week and need to know when other commitments mean you could not be available to work:

Please tick when you are unavailable:

	Mon	Tues	Weds	Thurs	Fri	Sat
Morning						
Afternoon						
Evening						

4. Education/Qualifications

School (11+)	Study Dates	Qualification and Grade	Date Obtained
College/University	Study Dates	Qualification and Grade	Date Obtained
Ongoing Professional Development	Study Dates	Qualification and Grade	Date Obtained

5. Training and Development

Please use the space below to give details of any CPD, training or non-qualification based development which is relevant to being an Associate and supports your application.

Training Course	Course Details (including length of course/nature of training)

6. Current Membership of any Professional Body/Organisation

Please give details:

Employment History

Previous Employment: Please include any previous experience (paid or unpaid), starting with the most recent first for the past 10 years.

Current or most recent employer

Name of Employer:

Address:

Postcode:

Position Held:

Date Started: Leaving Date:

Reason for Leaving:

Salary on leaving this post: Contact Name of Line Manager for reference:

Brief description of duties:

Previous employer

Continue on separate sheet if necessary

I Information in support of your application

Skills, abilities and experience

Please use this section to demonstrate why you think you would be suitable as an Associate Child Therapist making reference to the role information provided. Please include all relevant information, whether obtained through formal employment or voluntary/leisure activities. Attach and label any additional sheets used.

Continue on a separate sheet if necessary

Convictions/ Disqualifications

To ensure the safety of our clients, you must have an enhanced DBS check completed for all positions (available from VANEL). A criminal record will not necessarily be a bar to obtaining a position at Fortis Therapy and Training. If a check is returned and reveals any information, this will be discussed with the applicant. The Directors will make a decision as to whether the offer of Associate work should be withdrawn.

Rehabilitation of Offenders Act 1974 (Exceptions)(Amendment) Order 1986

We would draw your attention to the following statement:-

“Because of the nature of the work for which you are applying, this post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act, 1974, by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 and the Rehabilitation of Offenders Act 1974 (Exceptions) (Amendment) Order 1986. Applicants are, therefore, not entitled to withhold information about convictions which for other purposes are ‘spent’ under the provisions of the Act”.

Please provide details below if you have been convicted of a criminal offence or been the subject of a conditional discharge or probation order. (Past criminal proceedings are not necessarily an obstacle to taking up a post. This occurs only where the offence/s is/are deemed relevant. Any details will be discussed with you should you be the successful candidate based on your supporting statement, interview and tests).

Reasonable Adjustments/Arrangements for Interview

Please contact us if you need the application form in an alternative format.

Are you subject to any conditions relating to working in this country?

YES/NO

If "yes" please use the space below to tell us what these are?

If you need us to make any adaptations for your interview to accommodate any disability you may have please tell us what these should be?

If appointed when could you start? Give period of notice if applicable

References

Please give the detail of **two** references (please note that relatives cannot be referees, and one should be a previous employer).

Name of Referee and relationship to you:

Address:

<input type="text"/>	
<input type="text"/>	
Email:	Postcode:
<input type="text"/>	<input type="text"/>
Tel:	<input type="text"/>

Name of Referee and relationship to you:

Address:

<input type="text"/>	
<input type="text"/>	
Email:	Postcode:
<input type="text"/>	<input type="text"/>
Tel:	<input type="text"/>

Declaration

Statement to be Signed by the Applicant

Please complete the following declaration and sign it in the appropriate place below. If this declaration is not completed and signed, your application will not be considered.

I agree that Fortis Therapy and Training can create and maintain computer and paper records of my personal data and that this will be processed and stored in accordance with the Data Protection Act 1998.

I confirm that all the information given by me on this form is correct and accurate and I understand that if any of the information I have provided is later found to be false or misleading, any offer of work may be withdrawn and work can be terminated.

Signed:

<input type="text"/>
<input type="text"/>

Date:

GUIDANCE SHEET

Please read through the following guidelines that will help you complete the application form.

- Complete all sections of the form.

- Make sure the form is tidy and try to avoid mistakes by writing out a version first to make sure you are happy with the information you are providing. Alternatively, if typing the form please ensure that the information is accurate. Always read through your final version before you send/email it.

If you require an acknowledgement of your application:

- If emailing you must activate a read receipt from your email account.
- If sending by post you must enclose a stamped addressed envelope.
- Please note with limited resources, we cannot verify if we have received your application over the phone.

To complete your application:

- Please type or write clearly in black or blue ink.
- In the 'Employment History' section you must state why you have left a position.
- Always explain any gaps in work history.
- Proof of qualifications, professional membership, insurance and DBS are required.

References

We will take up professional references. Please make sure that you have given the full contact details of your referees so that this does not delay processing reference requests.

If you have no employer references, we will take up references with named individuals at colleges where you have studied, or people who know you in a professional capacity. Please do not put down family members or people you live with as referees.

You will only be confirmed as an Associate once we are satisfied with the information received from your referees.

Supporting Statement

The 'Why you feel you are suitable for this position' part of the form is called your *supporting statement*. It is the most important part of the application form.

You should consider the following:

- Applications can only be assessed on the information you provide. You need to clearly demonstrate your capabilities.
- You need to explain how you meet each of the role description requirements and provide examples from your previous experience.
- Often the strongest applications are those that link the elements highlighted above and are presented in a clear format.
- We expect your supporting statement to be a minimum of $\frac{3}{4}$ of a side of A4 and a maximum of 2 sides.
- Use concise, unambiguous sentences and avoid exaggerations.
- Honesty is always the best policy; please do not make false claims.
- If you are making a career change, stress what skills are transferable to the role you are applying for.
- Ensure you return your application in good time before the closing date - aim for the day before the deadline.
- Use concise, unambiguous sentences and avoid exaggerations.

Finally good luck with your application and thank you for your interest in Fortis Therapy and Training.