



The aim of Project SEARCH's is to help secure competitive employment for people with learning disabilities and / or Autism over 16 hours / week.

By applying for Project SEARCH you understand that this is about getting a job.

We know this form asks for a lot of information – it is fine to ask for help to complete it. You could ask a parent / friend / lecturer / job coach / support worker.

What Project SEARCH site are you interested in? You can tick more than one.

Host Business	Tick
Glasgow Royal Infirmary <b>only</b>	
University of Strathclyde <b>only</b>	
I would like to be considered for <b>both</b> sites	

### Eligibility

Date of birth?	
What local authority do you or your family pay council tax?	
	<b>Tick the box(es) below that apply to you</b>
Autism:	
Learning disability:	
Other disability or health condition	

Benefits Received	Level	Further Information

**Do you have an appointee to deal with your benefits?**

<b>Yes</b>	<b>No</b>	<b>Don't know</b>
<b>Name / Contact number</b>		

**Past Bursary Information**

<b>College Name</b>	<b>To</b>	<b>From</b>

**Project Search is a full time programme which means Monday until Friday 9am -- 4pm**

<b>Are you able to commit to Monday to Friday 9am – 4pm?</b>	<b>Yes</b>	<b>No</b>
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**Project SEARCH  
Application Form**

The information that you supply in the personal details section will not be available to those involved in the selection process and all information supplied will be treated in the strictest of confidence.

**PERSONAL DETAILS**

<b>Last Name / Family Name</b>		<b>Title</b>	
<b>First Name</b>			
<b>Date of Birth</b>			
<b>Current Address (inc postcode)</b>			
<b>Mobile Tel No</b>		<b>Home Tel No</b>	
<b>National Insurance Number</b>		<b>Email address</b>	
<b>How would you like to be contacted?</b>	Mobile	Home Number	Email
<b>Contact details of Parent / Guardian / Support Person</b>	Parent	Guardian	Support Person
	Name		
	Address		
	Phone Number		
	Email		

**Why are you applying for Project SEARCH?**

**Why do you want to work more than 16 hours per week?**

**Tick the boxes that match your skills in the following areas:**

<b>I am good at...</b>	<b>1 Strongly agree</b>	<b>2 Disagree</b>	<b>3 Neither agree or disagree</b>	<b>4 Agree</b>	<b>5 Strongly agree</b>
<b>Time keeping</b>					
<b>Working with others</b>					
<b>Verbal communication</b>					
<b>Working independently</b>					
<b>Following instructions</b>					
<b>Completing tasks I do not enjoy/like</b>					
<b>Meeting new people/environments</b>					
<b>Keeping a positive attitude</b>					
<b>Using online learning</b>					

**Do you know what job you would like to do? Don't worry if you don't know this yet.**

**EDUCATION – SCHOOLS AND COLLEGES (start with the most recent)**

<b>Name of School / College</b>	
<b>Dates Attended</b>	<b>To</b> <b>From</b>
<b>Qualifications Achieved</b>	

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<b>Qualifications Achieved</b>	

**You can add anymore at the end of the form**

**EMPLOYMENT / WORK EXPERIENCE / TRAINING / VOLUNTEERING (start with the most recent)**

<b>Name of Organisation and address (if known)</b>	
<b>From:</b>	<b>To:</b>
<b>How many days per week?</b>	
<b>Role:</b>	
<b>Tasks/responsibilities:</b>	

<b>Name of Organisation and address</b>	
<b>From:</b>	<b>To:</b>
<b>How many days per week?</b>	
<b>Role:</b>	
<b>Tasks/responsibilities:</b>	

<b>Name of Organisation and address</b>	
<b>From:</b>	<b>To:</b>
<b>How many days per week?</b>	
<b>Role:</b>	
<b>Tasks/responsibilities:</b>	

**EMPLOYMENT / WORK EXPERIENCE / TRAINING / VOLUNTEERING  
(continued)**

<b>Name of Organisation and address</b>
<b>From:</b> _____ <b>To:</b> _____
<b>How many days per week?</b>
<b>Role:</b>
<b>Tasks/responsibilities:</b>

**ADDITIONAL INFORMATION**

**HOBBIES / INTERESTS – let us know what you do in your spare time**

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**TRAVEL**

Can you travel independently?	Yes	No	With support
If not an independent traveler, are you willing to learn before the start date of the course?	Yes	No	
How would you travel to the host business?			
Are you able to travel to different locations to complete work placements out of the Project Search site?	Yes	No	With support

**How does your autism / learning disability affect you in your daily life?**

	TICK
Sensory- light/noise/smells/touch	
Anxiety	
Large crowds	
Speaking in groups	
Communication – written/verbal/eye contact	
Learning new tasks	
Meeting new people	
Being in a new environment	
Other	Please explain

**What support do you think you may need on Project Search?**

**Is there anything else you want us to know about you?**



## General Data Protection Regulation (GDPR)

The information you give on this form is covered by the General Data Protection Regulation 2018. We will keep it confidential and only use it in relation to your application for a place on the Project Search Course. If you are successful, we will keep this information for the duration of your position on the course. If you are unsuccessful, we will keep your information for 6 months after which your information will be destroyed.

Please note your information **will** be shared with our partners.

If you wish further information on GDPR, please see the college website.  
[www.glasgowclyde.ac.uk](http://www.glasgowclyde.ac.uk)

I declare that the information set out in this Application Form for a place on the Project SEARCH Course is true in all respects, and I understand that false information or failure to declare information may result in withdrawal of my place on the course.

I understand that if successful, my place on the Project Search Course will be subject to the receipt of references satisfactory to the College, plus clearance for any Disclosure Scotland / PVG check that may be required.

Applicant Signature:
Date:

## Referees

Please complete all relevant sections below for each referee. If providing personal referees they must not be related to you. (If you are leaving full-time education please provide the names of relevant teachers or lecturers.)

<b>Referee 1</b>
Name
Job title
Address
Postcode

Telephone No.
E-mail address
Relationship to you (e.g. Line Manager, Colleague etc.)

<b>Referee 2</b>
Name
Job title
Address
Postcode
Telephone No
E-mail address
Relationship to you (e.g. Line Manager, Colleague etc.)

If there is anything else you want to tell us, please do so here (including any additional college / employment / work experience / support you could not fit in above)
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