**EMPLOYER RECRUITMENT INCENTIVE – 2024 / 2025**

**Application Form**

**Please return completed application form to employmentsupportteam@aberdeenshire.gov.uk**

**Information for the Individual:**

Employer Recruitment Incentives (ERI) are key Scottish Government initiatives, aimed at supporting the most disadvantaged people in Scotland to progress towards, and sustain employment. The No One Left Behind streams is jointly managed by the Scottish Government and local authorities. The ERI is a local offering, managed and administered by Aberdeenshire Council.

The information you give us on this form will be used to process your application. It will also be passed to other bodies concerned with the operation, monitoring and evaluation of this funding and/or with the provision of advice to you and/or monitoring of your progress. The reasons in which we retain and share your personal information are legally justified under the General Data Protection Regulation. For further information on this, please refer to the Aberdeenshire Council GDPR Record of Processing.

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| **Section 1 - Employer Information** | | | | |
| Name of Employer | |  | | |
| Contact Name | |  | | |
| Address | |  | | |
| Postcode | |  | | |
| Telephone Number |  | Mobile Number |  | |
| E-Mail Address | |  | | |
| Number of Employees in Scotland | |  | | |
| All employees are paid at least the Real Living Wage | | Yes  No | | |
| VAT Registration Number | |  | | |
| Company Registration Number (if applicable) | |  | | |
| Has the Company received any *Minimal Financial Assistance (MFA) or Services of Public Economic Interest Assistance (SPEI Assistance)* in the last 3 years | | | | Yes  No |
| For further details on Subsidy Control, MFA or SPEI Assistance please refer to link below:- [Minimal financial assistance - Subsidy control: guidance - gov.scot (www.gov.scot)](https://www.gov.scot/publications/subsidy-control-guidance/pages/special-drawing-rights/) | | | | |
| If you have received either MFA or SPEI Assistance before please give details of the amounts and when it was awarded | | Details: | | |

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| Are you receiving any other funding for **this** post? | Yes  No |
| If yes, please give details of funding |  |

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| **Section 2 – Participant Information** | | | | | |
| N.I. number |  | | | | |
| Title |  | | | Last Name |  |
| First Name |  | | | E-Mail |  |
| Home Phone No. |  | | | Mob Phone No. |  |
| Address |  | | | Post Code |  |
| Date of Birth |  | | | Disability | Yes  No |
| Unemployed | Yes  No | | | Expected Start Date |  |
| Length of unemployment | | Please indicate - \_\_\_\_week/s **OR** \_\_\_\_\_\_ month/s **OR** \_\_\_\_\_\_ year/s | | | |
| Type of contract being offered | Please circle – Permanent / Fixed Term / Contract for min of 52 weeks | | | Job title of position |  |
| Applicant’s current highest qualification |  | | | Is this an apprenticeship? | Yes  No |
| Apprenticeship qualification being offered (if applicable) | | |  | | |

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| **Participant Characteristics** | | | | | |
| Please tick **ALL** characteristics that apply to the employee being employed. | | | | | |
| Armed Forces Veteran |  | Asylum Seeker |  | Criminal Convictions |  |
| Homeless or affected by housing exclusion |  | No or limited work experience |  | Refugee |  |
| Substance related conditions |  | Childcare issues |  | Transport issues |  |
| Care experienced |  | Caring responsibilities | | |  |

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| **ELIGIBILITY REQUIREMENTS**  Please answer yes or no to the answers below in the box to the left of the statement | | |
| Yes  No | Participant is entering a new job or apprenticeship | |
| Yes  No | Participant faces significant barriers to employment | |
| Yes  No | Employer has received previous public funds for participant | |
| Yes  No | Employer is receiving any other funding for this post including from Aberdeenshire Council | |
| Yes  No | Job offers minimum of 16 hours per week and is expected to last 52 weeks or more | |
| Yes  No | A contact of employment will be made available within the first 8 weeks of employment (note – the contract needs to be permanent or fixed term for at least 52 weeks) | |
| Yes  No | You will ensure that the participant receives formal training as part of their job and as part of your investment in workforce development | |
| Yes  No | Ensure a safe and healthy working environment | |
| Yes  No | You have, or you will obtain Employers Liability Insurance | |
| Yes  No | Your organisation has an equal opportunities policy | |
| Yes  No | Your organisaiton is involved in the sex industry; politics; religion; nude or semi-nude modelling or photography; multi-level marketing/pyramid selling or any business that may bring Aberdeenshire Council into disrepute | |
| Yes  No | Your organisation has recently reduced their employee numbers or are planning redundancies. | |
| Yes  No | Your organisation have used and paid for a recruitment service to source their vacancy | |
|  | Your organisation has advertised and/or filled the post before written approval has been received from Aberdeenshire Council | |
| Yes  No | You agree to participate in quarterly review meetings with your employee and our team | |
| Yes  No | You will make a commitment to retain the participant beyond the period of the ERI support. | |
| For your information the following exclusions apply:   1. Public Sector organisations including Local Authority services and departments are specifically excluded from the fund.  This includes any agencies or organisations of the UK or Scottish Government e.g. emergency services, SDS, Scottish Enterprise, DWP, etc. 2. Further and Higher Education establishments. 3. Jobs which are subject to an Aberdeenshire Council Community Benefit Clause. | | |
| **REFERRAL SOURCE** | | |
| How did you hear about the Employer Recruitment Incentive? | | |
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| Are you happy for your contact details to be added to our mailing list so we can alert you to future funding opportunities? | | Yes  No |

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| **Section 3 – Application Assessment**  Please answer the below questions. Your application will be scored based on the answers provided so please give as much detail as possible |
| Please outline why you have applied for funding; including usage, approx costs and intended timescales. |
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| **Economic Benefits** – How does the job benefit the economy? How will a new job benefit the growth of your company as well as the local area? |
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| **Sector potential for growth** – What is the predicted growth of the sector over the next few years? Will there be increased demand, plans to export your service etc? |
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| **Employability Benefits** – How will recruiting the employee to benefit **them**? What training will they be provided with and will the skills learned be transferrable? |
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| **Contract** – Please confirm type of employment contract that will be provided e.g. permanent, fixed term for 52 weeks or more; or a fixed term contract for the duration of the apprenticeship (please specify the duration of the apprenticeship) . |
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| **Salary** – Please state the amount of hours per week the employee will be employed for and the hourly rate you intend to pay the employee. **Please note: applications will not be approved without this information**. |
| Amount of hours per week - .  Hourly rate of pay - £ . |

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| **Section 4 – Your agreement with us** | | | |
| **Before agreeing to participate and signing below, please take your time to read this section carefully.** This sets out the reasons why we require your personal information, how long we will store it for and who we are required to share it with.  It is necessary for information relating to training, eligibility and subsequent destinations of participants (“Relevant Information”) to be passed to the Scottish Government to monitor, audit and evaluate Employer Recruitment Incentives. Evaluation may include requesting both participating individuals and employers to complete any questionnaire issued by or on behalf of Scottish Ministers. This is so we know that public money is being spent appropriately, and that we are providing the best possible support to those who need it. Any results to surveys or questionnaires will be anonymous, and will be to help us improve the service we offer.  In addition, for the purposes of monitoring Local Authority Compliance and quality assurance and to assist with policy development, the Scottish Government may wish to contact both participants and employers by post, e-mail or telephone or meet directly to discuss the support, training and outcomes facilitated under the Incentive. | | | |
| By agreeing to participate in Aberdeenshire Employment CONNECT Employer Recruitment Incentives 2024/2025, I confirm that I have read and understand the contents of this section and hereby acknowledge and understand -  (a) That the personal information I have entered into this form, and the answers to the questions above, are required to be passed to public authorities concerned with economic and/or skills development (including Scottish Ministers, and/or government departments). We only pass your information to other organisations when it is prescribed under law, or when it is necessary for us to do so in carrying out our role as the administrators of the funding.  (b) That public authorities listed above, may contact me either directly or through duly authorised agents to assist them in the monitoring, audit and/or evaluation of Employer Recruitment Incentives fund and the assessment of the impact of Employer Recruitment Incentives funding.  (c) That I undertake to co-operate fully with Aberdeenshire Council and/or Scottish Government in response to any reasonable request for information concerning my participation in Employer Recruitment Incentives fund, to enable monitoring of Local Authority compliance and quality assurance and to assist with policy development. | | | |
| **Participant Signature** |  | **Date** |  |
| **Employer Signature** |  | **Date** |  |
| **Section 5 – Declarations** | | | |
| I declare that the information provided in this form is correct and the eligibility for Aberdeenshire Council Employment CONNECT Employer Recruitment Incentives 2024/2025 has been met.  I acknowledge that I have read and agree to the Aberdeenshire Council Employment CONNECT Terms and Conditions and that these will form part of the agreement with Aberdeenshire Council .    I acknowledge that prior to the commencement of employment, I will provide all documentation including proof of eligibility to take up paid employment, as well as any permits, licences, visas, consents, or other authorisations, that are required as part of the post.    I will agree to participate with the Aberdeenshire Council, In Work Support Service, for the duration of the funding period as a minimum. I understand that this may on occasion require face to face meetings to discuss progress and training needs.    A handwritten signature is required to certify that the above information is correct. Should this form be submitted and accepted with a typed/electronic signature, we will require additional email confirmation. | | | |
| **Print name** **of participant** |  | **Date** |  |
| **Signature of participant** |  | | |
| **Print name** **of employer** |  | **Date** |  |
| **Signature of employer** |  | | |

**Official Use only:**

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| **Application reviewed by: (Print Name)** |  | **Date** |  |
| **Application approved:** | **Yes  No** | | |
| **Reason for refusal:** |  | | |
| **Signed:** |  | | |
| **Position:** |  | | |