

REID HOWIE ASSOCIATES
Application to register for sessional research

1.	Name	
2.	Address	
3.	Daytime telephone number	Fax
4.	Evening telephone number	Mobile
5.	e-mail	
6.	<u>Qualifications</u>	<u>Dates</u>
7.	<u>Other Relevant Training</u>	<u>Dates</u>
8.	Please provide examples of your experience of research work	

9.	<p>Please specify the work for which you wish to be considered (tick as many as apply)</p> <p> Group discussions <input type="checkbox"/> Qualitative interviews <input type="checkbox"/> Literature reviews <input type="checkbox"/> Telephone surveys <input type="checkbox"/> Basic data analysis <input type="checkbox"/> Large scale interviewing <input type="checkbox"/> </p>
10.	<p>Please specify your areas of interest / expertise (tick as many as apply)</p> <p> women's issues <input type="checkbox"/> criminal justice <input type="checkbox"/> education <input type="checkbox"/> disability issues <input type="checkbox"/> economic devp <input type="checkbox"/> social work <input type="checkbox"/> race equality <input type="checkbox"/> housing <input type="checkbox"/> young people <input type="checkbox"/> elderly people <input type="checkbox"/> statutory services <input type="checkbox"/> voluntary sector <input type="checkbox"/> strategic planning <input type="checkbox"/> childcare <input type="checkbox"/> </p> <p>Any other specific areas of interest / expertise?</p>
11.	<p>Please specify your usual availability</p> <p> Mon am <input type="checkbox"/> Tues am <input type="checkbox"/> Wed am <input type="checkbox"/> Thurs am <input type="checkbox"/> Fri am <input type="checkbox"/> Mon pm <input type="checkbox"/> Tues pm <input type="checkbox"/> Wed pm <input type="checkbox"/> Thurs pm <input type="checkbox"/> Fri pm <input type="checkbox"/> evening Yes <input type="checkbox"/> No <input type="checkbox"/> weekend Yes <input type="checkbox"/> No <input type="checkbox"/> Are there any times of the year when you are unavailable ? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please specify </p>
12.	<p>As some of our work involves working for organisations requiring a Disclosure Scotland check, please state whether you have ever been convicted of a criminal offence</p> <p style="text-align: right;">Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please give brief details</p>
13.	<p>Please give the names, addresses and telephone numbers of two referees who can be approached if required</p>
14.	<p>I declare that the information provided within this form is true and accurate. I have read and accept the terms and conditions.</p> <p>Signed Date</p>

Please return your completed form to Reid - Howie Associates Ltd., 156 High Street, Burntisland KY3 9AP. Our telephone number is 01592 873900. Please note that your details may be used in research proposals.