APPLICATION FORM FOR EMPLOYMENT WITHIN CLIFTON DIOCESE

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| If you are unable to complete this form yourself because of a disability, it may be completed on your behalf by someone else but you must sign it. If you are invited to interview, you will be asked for details of any additional assistance or equipment you may require for the assessment tests or at interview. | | | | |
| **ROLE APPLIED FOR:** | | | | |
| **PERSONAL INFORMATION** | | | | |
| Surname/Family Name ……………………….. Dr/Mr/Mrs/Miss/Ms……………….  Any other name/s you may have been known by  ………………………………………………………………………………………….  Forenames ……………………………………………………………………………..  Home address ………………………………………………………………………….  ………………………………………………………………………………………….  Home Tel No………………………….. Mobile No ………………………………….    E-mail address …………………………………………………………………………  Nationality …………………………………………………………………………….  If you are not British or EU national please give details of any conditions related to your employment.  ………………………………………………………………………………………….  What is the earliest date you could commence employment with us? ……………….. | | | | |
| **PRESENT OR MOST RECENT EMPLOYMENT**  Please use additional A4 sheets if necessary, each labelled with your name. | | | | |
| Job Title: | | | | |
| Dates Employed: | | | | |
| Current or Most Recent Salary: | | | | |
| Reason for Leaving: | | | | |
| Employer’s name and address: | | | | |
| Key responsibilities of the role: | | | | |
| **EMPLOYMENT PRIOR TO THE ABOVE**  (Record all roles/posts you have had starting with the first)  All time since leaving full time education should be accounted for. Full details should be given of any period not accounted for by full-time employment, education or training. This would include for example, unemployment, voluntary work, raising a family, part-time work or education. Further clarification may be sought at interview. | | | | |
| From Month/Year | To  Month/Year | Title & Key Duties of the role | Employer’s name and address | Reason for leaving |
|  |  |  |  |  |

**EDUCATION AND QUALIFICATIONS**

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| --- | --- | --- | --- | --- |
| From | To | Name of School, College, University | Full or Part-time | Qualifications gained |
|  |  |  |  |  |

**PROFESSIONAL QUALIFICATIONS**

|  |  |  |  |
| --- | --- | --- | --- |
| Awarding Body/Qualification | Level/grade of membership | Date obtained | Registration No. |
|  |  |  |  |

**RELEVANT TRAINING –** give details of relevant training attended in the last 2 years

|  |  |
| --- | --- |
| Dates | Details of training |
|  |  |

**EXPERIENCE AND RELEVANT SKILLS**

You must assess yourself against each of the selection criteria on the person specification and give specific examples of how your skills, knowledge etc, meet these criteria, your evidence must be concise and to the point.

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Please use additional A4 sheets if necessary, each labelled with your name.

**REFEREES**

Please state the names and addresses of two persons, not related to you, from whom references may be obtained. One must be your current or most recent employer. Please note that we reserve the right to contact any previous employer for a reference.

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| --- | --- | --- | --- |
| Name and Position | Address and Telephone No. | Relationship to applicant | How long has the referee known you? |
|  |  |  |  |
|  |  |  |  |

Please confirm that we may contact your employer at this stage Yes/No (Please circle)

**CAR USAGE**

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| --- |
| Do you hold a full, current driving licence? Yes/No (Please circle as appropriate)  Do you have a car which you can use for work? Yes/No (Please circle as appropriate) |

**DECLARATION**

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| In accordance with the Data Protection Act 1998 I give my consent for the information contained in this form to be processed in accordance with Church Policy for the purposes of recruitment and employment.  I understand that if I am appointed, this application form will become part of my personal file and that if I am not appointed it will be stored for 6 months and then destroyed.  The information given is to the best of my knowledge and correct. I understand that deliberate misrepresentation or omission of factual information requested may lead to dismissal/legal action.  Signature …………………………………………………………..  Date ………………………………………………………….. |

When completed, please send the application form to: [sarah.adams@cliftondiocese.com](mailto:sarah.adams@cliftondiocese.com)