Home-Start Lisburn/Colin



12 Bow Lane, Lisburn BT28 1FL

Tel: 028 92628585

Application Form

We can only determine your suitability for the position from the information you give in this application.

Please read the Guidance Notes before completing this form. The closing date for this post is 12 noon, 24th August – any applications received after this date cannot be considered.

# Personal Details

|  |  |
| --- | --- |
| **Position Applied For:**    **Closing Date: 29th August 2017, 12 noon** | |
| **Surname:** | |
| **First Names:** | |
| **Address & Postcode:** | |
| **Home Tel. No:** | **Work Tel. No:** |

**Education**

|  |  |  |
| --- | --- | --- |
| **Examinations taken** | **Qualifications gained** | **Grade** |
|  |  |  |

**Job Related Qualifications/Specialised Training**

|  |  |  |
| --- | --- | --- |
| **Course Title** | **Grade** | **Date** |
|  |  |  |

**Present or most recent job:**

|  |  |
| --- | --- |
| **Job Title:** | **Employer’s Name & Address** |
| **Date Started/Finished:** |  |
| **Weekly Wage/Salary:** |
| **Notice Required:** |
| **Purpose of Job and Main Tasks:** | |
| **Reason for Leaving:** | |

**Previous Employment – in date order (most recent first)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Job Title/Duties** | **Employer** | **Date From/To** | **Reason for Leaving** |
|  |  |  |  |

**Voluntary Work**

Please provide details of any voluntary or community work in which you have been involved, including work experience

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# Relevant Skills, Knowledge and Experience

Please use the space below to show how you meet the requirements indicated on the Person Specification and what evidence you have to show you meet each item. Please structure your statement adopting the key headings of the person specification. Please use no more than two continuation sheets.

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| --- |
|  |

# Are you related to any person who works in a paid or unpaid capacity for Home-Start?

If yes please give details

# References

Please give the names and addresses of two referees who must not be related to you or a member of your household. One must be your current or most recent employer. We will only contact your referees if we make you a conditional offer.

**Please ask permission prior to submitting referee’s details and confirm full address.**

|  |  |
| --- | --- |
| **Name:** | **Name:** |
| **Position:** | **Position:** |
| **Time Known this Person:** | **Time Known this Person:** |
| **In What Capacity?** | **In What Capacity?** |
| **Address & Postcode:**  **Email:** | **Address & Postcode:**  **Email:** |
| **Phone No:** | **Phone No:** |

|  |  |  |
| --- | --- | --- |
| If offered this position, do you intend to continue working in any other capacity?  If Yes, give details: | Yes | No |

**Asylum and Immigration Act 1996**

|  |  |  |
| --- | --- | --- |
| **Are you eligible to work in the UK?** | **Yes** | **No** |

**Rehabilitation of Offenders Act 1974**

|  |  |  |
| --- | --- | --- |
| This post is exempt from the provisions of the Rehabilitation of Offenders Act, 1974. You must therefore disclose any criminal convictions that are not ‘protected’ as defined by the Rehabilitation of Offenders Order 1979, as amended in 2014. | | |
| **Have you ever been convicted of a criminal offence?**  **If Yes, you may be asked to supply details.** | **Yes** | **No** |

**Declaration**

I declare that to the best of my knowledge and belief, all statements contained in this form are correct. I understand that should I make deliberate misrepresentation any employment offered to me may be terminated. In submitting this information I agree that my application details may be held securely by Home-Start Lisburn/Colin.

**Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**