Victims & Survivors Service

**Job Application Form**

Advocacy Support Worker (Omagh)

Applicants must complete the application form in either Arial font size 12, or legible block capitals using black ink.

**Closing date for applications: 12 noon, 26th May 2017**

**Send to: Geraldine Gormley, GH Skills, 64A Derry Rd, Tyrone, Omagh BT78 5DY**

**Important: Please clearly mark envelope ‘Advocacy Support Worker post’**

**JOB APPLICATION FORM**

**POSITION APPLIED FOR**

|  |
| --- |
| Job Title |
| Ref. No. |
| Where did you see this post advertised? |

1. **APPLICANT DETAILS**

|  |  |  |
| --- | --- | --- |
| Title | Surname | Forename |
|  |  |  |
| Home Address | | |
|  | | |
| Post Code | | |

|  |  |
| --- | --- |
| Contact Details | |
| Daytime No. | |
| Evening No. | |
| Mobile No. | |
| Email Address | |
| National Insurance No. | |
| Town of Birth | |
| Country of Birth | |
| Do you hold a current driving license? | Yes/No |
| How much notice do you need to give your current employer? |  |

**2. EMPLOYMENT RECORD**

**Please start with your most recent employer**

|  |  |  |
| --- | --- | --- |
| Employer name: | | |
| Address: | | |
| Job title: | From: | To: |
| Brief description of duties: | | |
| Reason for leaving/changing: | | |

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| --- | --- | --- |
| Employer name: | | |
| Address: | | |
| Job title: | From: | To: |
| Brief description of duties: | | |
| Reason for leaving/changing: | | |

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| --- | --- | --- |
| Employer name: | | |
| Address: | | |
| Job title: | From: | To: |
| Brief description of duties: | | |
| Reason for leaving/changing: | | |

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| --- | --- | --- |
| Employer name: | | |
| Address: | | |
| Job title: | From: | To: |
| Brief description of duties: | | |
| Reason for leaving/changing: | | |

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| --- | --- | --- |
| Employer name: | | |
| Address: | | |
| Job title: | From: | To: |
| Brief description of duties: | | |
| Reason for leaving/changing: | | |

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| --- | --- | --- |
| Employer name: | | |
| Address: | | |
| Job title: | From: | To: |
| Brief description of duties: | | |
| Reason for leaving/changing: | | |

**3. EDUCATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of School/College | Qualification/Level | Subject | Grade Awarded | Date Gained |
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**4. FURTHER/HIGHER EDUCATION**

**Include information on undergraduate and postgraduate degrees, diplomas, evening and correspondence courses, vocational and technical courses**

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| --- | --- | --- | --- | --- |
| Name of University/College | Qualification/Level | Subject | Grade/ Class Awarded | Date Gained |
|  |  |  |  |  |
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**5. PROFESSIONAL MEMBERSHIPS**

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| --- |
| Please provide details of any memberships you hold. |

**6. ESSENTIAL ELIGIBILITY CRITERIA**

**By the closing date for applications, candidates must have:**

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| 6.1) **Third level education (degree) or 4 Years experience in providing Advocacy**  Yes No |
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| --- |
| 6.2) **A minimum of** **1 years experience in providing advocacy and advice to vulnerable clients.**  Yes No |
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| 6.3) **A minimum of 2 years practical experience collating and analysing complex information and writing reports.**  Yes No |
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| 6.4) **A minimum of 2 years’ practical experience of effectively managing complex client interactions.**  Yes No |
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| **6.5) A minimum of 2 years’ experience working and building relationships with multiple stakeholders.**  Yes No |
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| --- |
| **6.6) Experience in working with Victims & Survivors or the voluntary/community sector in a paid capacity.**  Yes No |
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| **6.8) Hold a full license valid in the UK with access to a car. This criterion will be waived in the case of an applicant whose disability prohibits driving but who is able to make alternative arrangements.**  Yes No |
|  |

**7. DESIRABLE CRITERIA**

Should it be necessary to shortlist candidates to go forward to interview the following shortlisting criteria will be used:

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| --- |
| 7.1) **A Level 3 Certificate in Independent Advocacy**  Yes No |
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| **7.2)** **Knowledge of Victims/Survivor legacy issues**  Yes No |
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| --- |
| **7.3) Knowledge of statutory departments and NGO services to support**  Yes No |
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| --- |
| **7.4) Strong working knowledge of all aspects of Microsoft Office Suite (to include Word, Excel, Outlook, Access, Publisher, PowerPoint).**  Yes No |
|  |

**8. SPECIAL REQUIREMENTS**

As an equal opportunities employer we wish to ensure that all applicants have the opportunity to perform to the best of their ability in either a test or interview situation.

Please let us know if you require any reasonable adjustments, or arrangements to enable you to attend for interview.

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**9. CRIMINAL OFFENCES**

Have you been discharged from an employer due to misappropriation or criminal offences? If yes please give details;

Yes No

Have you been convicted of a criminal offence or are pending any criminal proceedings? If yes please give details;

Yes No

Are you on currently on the Sex Offenders Register or have you ever been placed on the Sex offenders register; If yes please give details;

Yes No

**9. REFEREES**

If you are responding to a public advertisement, please provide the required information of two persons not related to you, to whom references may be sent. One of your referees must be either your current or previous employer (if any) and both should be able to comment on your ability to carry out the particular tasks of the job. If you do not wish us to contact your present employer, please provide your most recent previous employer.

**Current or previous employer (if any**)

|  |  |
| --- | --- |
| Name: |  |
|  |  |
| Job Title |  |
|  |  |
| Name of Organisation |  |
|  |  |
| Address (Including postcode) |  |
|  |  |
| Contact telephone: |  |

**Other employer or nominated character referee**

|  |  |
| --- | --- |
| Name: |  |
|  |  |
| Job Title |  |
|  |  |
| Name of Organisation |  |
|  |  |
| Address (Including postcode) |  |
|  |  |
| Contact telephone: |  |

**10. DECLARATION**

# I have read and understood the information provided in the candidate information booklet.

# The responses detailed in this application form are true and accurate to the best of my knowledge and belief. I understand that if I am found to have suppressed any material fact or to have given false answers I will be liable to disqualification or, if appointed, to dismissal.

# I give my consent for a criminal record check to be carried out as detailed in the ‘vetting’ section of the Candidate information booklet.

# I confirm I am aged 16 or over.

# I undertake to inform the Omagh Support & Self Help Group in writing of any changes in my circumstances which may occur between the date of my application and any possible date of appointment.

Signed:

Please send this completed application form to:

**Geraldine Gormley,**

**GH Skills,**

**64A Derry Rd,**

**Tyrone,**

**Omagh**

**BT78 5DY**

Your application must be received no later than: **12 noon on 26th May2017.**