

***For official purposes:***

#### Date rec.

Ref No:

**Recruitment Application Form**

**Position Applied for**

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| **Senior Marketing Executive** |

**Closing Date**

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| **Monday 5 June at 12 Noon** |

**Please refer to the Job Description and Personnel Specification before completing the application form.**

**Contact:**

**HR Department**

**Employers For Childcare**

**Blaris Industrial Estate**

**11 Altona Road**

**Lisburn**

**BT27 5QB**

**Tel: 028 9267 8200 Option 6**

**Fax: 028 9267 9200**

**Email: hr@employersforchildcare.org**

**Website: www.employersforchildcare.org**

**Personal Details**

|  |  |
| --- | --- |
| Surname: | Title: MR/MRS/MISS/MS |
| First Names (in full): | Previous Surnames: |
| Address:  Post Code: | Telephone No (including area code):  Mobile Telephone No:  E-mail Address:  National Insurance Number: |

**Do you have a full clean driving license which allows you to drive in NI?**

YES/NO *(delete as appropriate)*

**Do you have your own car?**

YES/NO *(delete as appropriate)*

**Are you able to work flexible, unsocial hours and travel throughout Northern Ireland, UK and elsewhere at times demanded by the job?**

YES/NO *(delete as appropriate)*

**Do you require a permit to work in the EU?**

YES/NO *(delete as appropriate)*

**If yes, please give details**

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**Education/Qualifications**

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| --- | --- | --- | --- |
| **Date** | **Subject or Title of**  **Qualification** | **Level of Qualification** | **Grade of Qualification** |
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**Current Professional Qualifications**

Please detail membership of professional organisations or institutes.

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*(Continue on separate sheet if necessary, marked with your name and the post for which you are applying)*

**Employment History**

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| **Name and address of present/most recent employer**  **Name:**  **Address:**  **Post Code:** | **Date appointed**  **(DD/MM/YY)** | **Present salary pa**  **Detail other elements of remuneration package** |
| **Job Title** | |
| **Period of Notice Required** | |
| **Please give reason for and date of leaving (if applicable):** | | |
| **Principal Duties** | | |

*(Continue on separate sheet if necessary, marked with your name and the post for which you are applying)*

## Previous Experience

Please give details of all previous posts held, beginning with the most recent. If you have held more than one position with an employer please give details of each position. (Please attach additional pages as required)

|  |  |  |  |
| --- | --- | --- | --- |
| **Name & Address**  **of Employer** | **Dates Employed** | | **Salary upon leaving** |
| **From** | **To** |
|  |  |  |  |
|  | | | |
| **Position Held & Description of Duties** | | | |
|  | | | |
| **Reason for Leaving** | | | |
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**Gaps in Employment**

If there are any gaps in your employment please explain in this section.

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*(Continue on separate sheet if necessary, marked with your name and the post for which you are applying)*

## Previous Experience

Please give details of all previous posts held, beginning with the most recent. If you have held more than one position with an employer please give details of each position. (Please attach additional pages as required)

|  |  |  |  |
| --- | --- | --- | --- |
| **Name & Address**  **of Employer** | **Dates Employed** | | **Salary upon leaving** |
| **From** | **To** |
|  |  |  |  |
|  | | | |
| **Position Held & Description of Duties** | | | |
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| **Reason for Leaving** | | | |
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**Gaps in Employment**

If there are any gaps in your employment please explain in this section.

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*(Continue on separate sheet if necessary, marked with your name and the post for which you are applying)*

**Information for Shortlisting Purposes Ref No:** \_\_\_\_\_\_\_\_\_\_

Please outline your experience in relation to the essential criteria as specified in the Personnel Specification.

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| **Essential Criteria - Qualifications** |
| *A degree in a marketing related discipline or equivalent* |

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| **Desirable Criteria - Qualifications** |
| *Membership of the Chartered Institute of Marketing (CIM)* |

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| **Essential Criteria - Experience** |
| *Minimum of 5 years’ post qualification experience in a marketing role including digital marketing, design and production of in-house promotional materials, management of marketing campaigns, events management, managing social media channels and media relations (maximum 350 words)* |

*(Continue on separate sheet if necessary, marked with your name and the post for which you are applying)*

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| **Essential Criteria - Experience** |
| *Experience of Supervising a team (Maximum 200 words)* |

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| **Essential Criteria - Experience** |
| *IT Literate to include extensive use of electronic communications, desktop publishing and Microsoft Office programmes. (Maximum 150 words)* |

*(Continue on separate sheet if necessary, marked with your name and the post for which you are applying)*

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| **Desirable Criteria - Experience** |
| *Competent in the use of graphic design package CS4 and CS6, understanding of server, printer, laptop and PC troubleshooting, Knowledge of operating systems, software and networking (max 150 words)* |

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| **Desirable Criteria - Experience** |
| *Technical experience to include:*   * *Understanding of server, printer, laptop and PC troubleshooting* * *Knowledge of operating systems, software and networking (max 150 words)* |

*(Continue on separate sheet if necessary, marked with your name and the post for which you are applying)*

**References**

|  |  |
| --- | --- |
| Please provide contact details for all previous employers within the last 10 years. References will not be sought without prior approval of applicant.  (Please attach additional pages as required) | |
| Name:  Occupation:  Address:  Post Code:  Telephone Number:  Email:  How long has this person known you:  What capacity does this person know you? | Name:  Occupation:  Address:  Post Code:  Telephone Number:  Email:  How long has this person known you:  What capacity does this person know you? |
| Name:  Occupation:  Address:  Post Code:  Telephone Number:  Email:  How long has this person known you:  What capacity does this person know you? | Name:  Occupation:  Address:  Post Code:  Telephone Number:  Email:  How long has this person known you:  What capacity does this person know you? |

**Holiday Arrangements**

**Please indicate planned holiday arrangements or other dates when you are unavailable for interview**.

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Employers For Childcare Charitable Group is under no obligation to take account of holiday arrangements but will endeavour to do so.

**Advertising**

Please indicate where you heard of this vacancy:

**□ NIJobs.com □ CommunityNI □ Job Centre □ Word of mouth**

**□ Employers For Childcare Website □ Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# APPLICANT’S DECLARATION

I declare that all the information I have given is correct. I understand that any false information given or information omitted may result in any offer of employment being withdrawn or in employment being terminated.

I understand that the appointment is subject to receipt of satisfactory reference, the verification of qualifications required for the post (as per the Personnel Specification) and relevant disclosure check.

I hereby give consent for the information on this form to be collected, stored and processed in accordance with the provisions of the Data Protection Act 1998.

**SIGNED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| Senior Marketing Executive |

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Post Applied For: Reference No:

**PLEASE BE ADVISED THAT THIS PAGE SHALL NOT BE MADE AVAILABLE TO THE SHORTLISTING PANEL – FAILURE TO COMPLETE THIS SECTION WILL RENDER YOUR APPLICATION INVALID.**

**MEDICAL HISTORY**

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| Please provide details and approximate dates of **all periods** of sickness during the **past 5 years**.  *(Please continue on separate sheet if necessary)* |

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| **Dates of Sickness** | **No. of days** | **Reason for Sickness** |
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| Please give details of any illness you suffer from or have suffered from which could affect your capacity to work.  Employers For Childcare Charitable Group reserves the right to verify the above information with your current or previous employer. | | |

**CRIMINAL CONVICTIONS**

Do you have any convictions that are not "protected" as defined by the Rehabilitation of Offenders (Northern Ireland) Order 1978, as amended in 2014?

YES/NO *(delete as appropriate)*

Have you any legal charges currently outstanding? YES/NO *(delete as appropriate)*

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| *If so, please give details. You need not include motoring convictions unless your driving licence has a current endorsement as a result, and you need not include convictions which are “spent” under the Rehabilitation of Offenders (NI) Order 1978, as amended in 2014.*  *Please refer to the Table of Rehabilitation Periods in the Information Pack.* |
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**Equal Opportunities Monitoring Form**

*In strictest confidence*

We are an Equal Opportunities employer and we welcome applicants regardless of religious belief, political opinion, race or ethnic origin, gender, marital status, sexual orientation, disability or age.

The use and confidentiality of Community Background information is protected by the Fair Employment and Treatment (NI) Order 1998. It will be used only for monitoring, investigations or proceedings under the requirements of the above legislation.

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| Senior Marketing Executive |

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# Post Applied For: Reference No:

**1. Community Background**

Regardless of whether we practise religion, most of us in Northern Ireland are seen as either Protestant or Roman Catholic.

Please indicate your community background: (delete as appropriate)

**□ I am a member of the Protestant community**

**□ I am a member of the Catholic community**

**□ I am a member of neither the Protestant or the Catholic community**

If you do not answer the above question, we will use the residuary method, which means that we can make a determination as to your community background on the basis of the personal information supplied by you in your application form.

**2. Gender** (delete as appropriate)

**□ Female □ Male**

**3. Age**

Please state your date of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4. Disability**

In line with the Disability Discrimination Act 1995, a disability is defined as “a physical or mental impairment which has a substantial and long term adverse effect on your ability to carry out normal day to day activities”

Having read this definition do you consider yourself to have a disability? (delete as appropriate)

**□Yes □ No**