

**TUTOR**

**APPLICATION FORM**

Please complete in typescript (at least font size 12)

NOTE: Late or incomplete applications will not be accepted

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| **Job Title** | Administrative Assistant |
| **Location** | Tuned In Project (L’ Derry) |
| **Closing Date** | 20/1/25 |

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| **Personal Details** |
| Title |  |
| Forename(s) |  |
| Surname |  |
| Address |  |
| Postcode |  |
| Home Telephone No |  |
| Mobile No |  |
| Work No |  |
| Email Address |  |
| National Insurance No |  |

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| Are you eligible to work in the UK? |  |
| **NOTE:** The successful candidate will be required to provide documentation to support their claim that they are entitled to work in the UK. This is required under sections 15 to 25 of the Immigration, Asylum and Nationality Act 2006. |
| Are you registered with the Northern Ireland Social Care Council?  |  |
| If Yes, please state your Registration Number |  |
| Please give dates of any planned holidays | From: To: |
| **Foyle Parents and Friends Association – Tuned In Project may not be able to accommodate holidays** |

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| **Ability to drive** |
| Do you hold a current driving licence? |  |
| Are you a car owner? |  |
| Have you any valid endorsements? |  |

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| Are you available to work late nights and weekends? |
| Yes |  |
| No |  |

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| **Employment History** |
| Please complete the table below starting with your current or most recent employer. Please complete in full using a separate sheet if necessary and give reasons for any gaps in employment. |
| Date commenced employment |  |
| Date left |  |
| Employer Name |  |
| Employer Address |  |
| Job Title |  |
| Salary/Hourly Rate of Pay |  |
| Reason for leaving  |  |
| Period of notice |  |
| Duties and Responsibilities |
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| **Previous Employment** (All previous employment over the past 10 years must be accounted for in your application – if applicable) |
| Employer Name & Address | Position Held | Dates From To  | Reason for Leaving |
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| **Education and Training** (Please provide details of any relevant qualifications or training you have received) |

Please list all relevant **secondary** qualifications obtained

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| **Qualification** | **Subject** | **Grade** |
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**Further and Higher Education**

Please list all qualifications of degree level or equivalent

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| **Institution Name** | **Title of Award/ Qualification** | **Exams to be taken** | **Grade** |
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| **Knowledge, Skills and Abilities** (Please provide information demonstrating how you meet the ESSENTIAL and DESIRABLE criteria for this job position found in the Job Description) |
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| **Criminal Records/Convictions** |
| Candidates need to be aware that it is the policy of the organisation to obtain an Access NI Enhanced Disclosure on each employee before they commence their employment with the organisation. (This requirement is only applicable to candidates we wish to appoint).The amendments to the Rehabilitation of Offenders (Exceptions Order) (Northern Ireland) Order 1979, (2014), provide that certain spent convictions and causes are ‘protected’ and are not subject to disclosure to employers and cannot be considered. Guidance and criteria on the filtering of these cautions and convictions can be found on the Access NI website.**DO YOU HAVE ANY CONVICTIONS, CAUTIONS, REPRIMANDS OR FINAL WARNINGS THAT ARE NOT “PROTECTED” AS DEFINED BY THE REHABILITATION OF OFFENDERS (EXCEPTIONS ORDER) (NORTHERN IRELAND) ORDER 1979, AS AMENDED IN 2014?**(Please tick) YES NO If YES, please give details (continue on a separate sheet if necessary) |
| **IT IS A CRIMINAL OFFENCE FOR A PERSON TO KNOWINGLY APPLY FOR A POSITION WHICH THEY ARE BARRED FROM**Is there any reason why you cannot work with children/vulnerable adults?(Please tick) YES NO If YES, please give details (continue on a separate sheet if necessary) |

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| References |
| Please give details of two referees, one of whom should be your present or most recent employer. (References will not be taken up unless you are shortlisted) |

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| **Referee 1** |
| Name |  |
| Position |  |
| Company Name |  |
| Email Address |  |
| Telephone No |  |

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| **Referee 2** |
| Name |  |
| Position |  |
| Company Name |  |
| Email Address |  |
| Telephone No |  |

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| **Declaration****I declare that the information contained in this application is true and complete and that any false or misleading information may lead to the offer of employment being withdrawn or to dismissal****I understand the data I have given will be processed and give my permission for it to be retained in accordance with the Data Protection Act .****I understand that I will be asked to provide evidence of my identity and qualifications before I can be offered this job.****Signature: Date:**(You will be asked to sign a hard copy of this application if you are successful)**EMAIL COMPLETED APPLICATIONS TO:** tunedin@outlook.com |