**Expression of Interest**

 **Sessional Counsellor**

Please complete form in black ink and return to

**Kate Scullion,**

 **Lenadoon Community Counselling Service, 1st Floor, 124 Stewartstown Road,**

**Belfast, BT11 9JQ**

Please complete this form in black. Please complete in block handwriting or in Arial 12 if typing. Please make sure to mark clearly any additional pages. Emailed and scanned copies will not be accepted. All applications must be signed and dated. Late applications will not be accepted.

###

|  |
| --- |
| **Closing Date: Monday 28th April 2025 - 12 NOON**  |
| Hard copy, signed, completed applicationsmust be returned to Kate Scullion by **12pm on Monday 28th April 2025**. Forms received after this date and time will not be considered (please bear this in mind if sending completed applications by post). We will **not** accept emailed applications.  | Lenadoon Community ForumKate Scullion Lenadoon Community Counselling Service1st Floor, 124 Stewartstown RoadBelfast,BT11 9JQ |

### PERSONAL DETAILS

|  |  |
| --- | --- |
| **Title: Mr/Mrs/Ms/Miss**  | **Full Name:** |
| **Address for Correspondence:** |
|  |
| **Postcode:** | **Email Address:** |
| **Daytime Telephone No:** | **Evening Telephone No:** |

**EDUCATION/QUALIFICATIONS**

|  |  |  |  |
| --- | --- | --- | --- |
| SUBJECT & AWARDING BODY (please use a separate sheet if necessary. please include your name, address, date and post applied for) | Level Attained | Grade/Mark Obtained | Year Obtained |
|  |  |  |  |

**MEMBERSHIP OF/REGISTRATION WITH PROFESSIONAL BODIES**

|  |  |  |
| --- | --- | --- |
| Name of Professional Body | Membership/Registration Number & Level of Membership | Date Joined/**Renewal Date** (if applicable) |
|  |  |  |

**ACCREDITATION WITH PROFESSIONAL BODIES**

|  |  |  |
| --- | --- | --- |
| Name of Professional Body | Accreditation Level/Description | Date achieved |
|  |  |  |

**WORK HISTORY / EXPERIENCE**: Please provide details of any relevant work and experience, commencing with most recent and providing information about any gaps in employment. Please ensure you provide accurate and full details of dates, month and year**, role, responsibilities** etc.

|  |  |  |  |
| --- | --- | --- | --- |
| Dates(dd/mm/yy) | Service Provision / Work / Employment | Details of services and/or work provided | Reason for finish |
| From | To |  |  |  |
|  |  |  |  |  |

**PERSONAL SPECIFICATION** Please clearly demonstrate how you meet **all** the essential and desirable criteria detailed in the person specification making sure you provide practical examples and relevant information for **each of the criteria**. Please use a separate sheet(s) if necessary, ensuring the date, the job you are applying for, and your name are stated clearly. Please also number each of the additional pages.

|  |
| --- |
|  |

**SUPPLEMENTARY INFORMATION** Please use this space to provide any additional information you feel may be relevant and appropriate to support your application.

|  |
| --- |
|  |

**REFERENCES:**

Please provide the names and full addresses of referees we can contact. They should **not** be family (or extended family) members or friends and must have a comprehensive knowledge of your capability and work experience. We will contact these references prior to employment.

|  |  |
| --- | --- |
| Name: | Name: |
| Capacity in which you know them: | Capacity in which you know them: |
| Organisation: | Organisation: |
| Address: | Address: |
| Postcode: | Postcode: |
| Telephone No.: | Telephone No.: |

**Please Note:**

We are required by GDPR & the Data Protection Act 1998 to inform you how we will use any personal information that we hold either manually or on computer in relation to this application and any subsequent period of engagement. This form and any additional information you provide in support will be held confidentially for a period of one year if you are unsuccessful.

If you are successful, it will be held during the period contract and thereafter for as long as it is necessary to meet regulatory, funding or other legal requirements. During this time we will not disclose its contents to a third party unless we believe it is lawful to do so.

### **PERSONAL STATEMENT**

### I declare that the information I have provided in this application is, to the best of my knowledge, accurate. I understand that the provision of false or misleading information in connection with it or the omission of relevant information may result in rejection at selection stage or instant termination of my employment. I authorise Lenadoon Community Forum to process any personal data given on any part of this form.

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

Name (in capitals): \_\_\_\_\_\_\_\_\_\_\_\_\_