*Administrator*

**Application Form**

Please return this form by email to caroline.dennis@stpaulskingston.org.uk by Wednesday 4th March 2020. Enter your responses in the boxes provided they will expand as you type where required.

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| **Personal Information** |
| Surname | Enter surname | First Name | Enter first name | Title | Enter title |
| Address | Enter address | Telephone | Enter number |
|  |  | Mobile | Enter number |
| Email | Enter email address |
| Are there any legal restrictions to you working in the UK? Yes [ ]  No [ ] If yes, please give details Enter details |
| Do you have a current enhanced DBS clearance? Yes [ ]  No [ ]  |
| Do you have a full driving licence? Yes [ ]  No [ ] If yes, have you ever had any bans, convictions or points? Yes [ ]  No [ ]  |
| If appointed, when would you be available to take up this post? Enter date |

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| **References**(At least one reference should have experience of you in a work environment, references of shortlisted candidates will be contacted in advance of interview) |
| Work referee: | Second referee: |
| Name: | Enter name | Name: | Enter name |
| Address: | Enter address | Address: | Enter address |
| Telephone: | Enter number | Telephone: | Enter number |
| Email: | Enter email | Email: | Enter email |
| Position: | Enter position held | Relationship: | Enter relationship |

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| **Your Education**(Please list **all** qualifications, academic and professional, in chronological order starting with the most recent) |
| Dates | School, College or University | Qualification | Grade |
| From | To |
| Start date | End date | Name of institution | Subject & level studied (e.g. A-level Photography) | Grade achieved |

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| **Relevant Work Experience**(Please list **all** relevant work experience, paid and voluntary, in chronological order staring with the most recent) |
| Dates | Organisation | Position | Responsibilities |
| From | To |
| Start date | End date | Name of Church, Organisation or Company | Enter position | Enter responsibilities |

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| **Other Work Experience**(Please list **all** other work experience in chronological order staring with the most recent) |
| Dates | Organisation | Position | Responsibilities |
| From | To |
| Start date | End date | Name of Church, Organisation or Company | Enter position | Enter responsibilities |

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| **Church Life (if relevant)**  |
| Name of current church/fellowship | Name of current church |
| Name of Senior Vicar/Pastor/Minister | Name of current Vicar |
| How long have you been a member of this church? | Enter time |
| Describe your involvement in church |
| Enter text |

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| Describe how you like to spend your free time, your hobbies and interests |
| Enter text |

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| **Personal Statement**(In no more than 500 words describe how you are suited for this job and how you would fulfil the role as described in the attached job description and person specification) |
| Enter text (max 500 words) |

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| **Anything Else?**Is there anything else that you’d like us to know or consider when we look at your application? |
| Enter text |

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| **Declarations**(Please note that any appointment is subject to an enhance DBS check) |
| Have you ever been convicted or cautioned with respect to a criminal offence? Yes [ ]  No [ ] If yes, please give full details on a separate sheet. Because of the nature of the work for which you are applying, this post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. This means that you are not entitled to withhold information about convictions which for other purposes are 'spent' under provisions of the Act. In the event of employment, failure to disclose such convictions could lead to disciplinary action being taken. Any information will be treated in the strictest confidence and used solely in relation to this application. |
| I declare that there is no reason why I should not be considered for work with children, young people and vulnerable adults and that I have never been placed on a related register of offenders or barring list. | Signed:Enter full nameDated: Enter date |
| I declare that, to the best of my knowledge and belief, the information I have provided on this form is correct and, if any of the information were to change before interview, I would inform the panel. | Signed:Enter full nameDated: Enter date |