

APPLICATION FOR EMPLOYMENT

APRIL 2016 EDITION

POST DETAILS	OFFICE USE ONLY
Position applied for:	Date Rec'd:
Location of post:	Shortlist? Y / N
Where did you see this post advertised?	Int. Date:
First Names:	Informed? Y / N

Surname:

Address:	Title (Mr., Ms., Dr., etc.):
	Telephone (home):
	(Mobile):
	(Work):
Post Code:	E-Mail address:

2. EDUCATION & PROFESSIONAL DEVELOPMENT

Secondary School, College, University	Dates (from - to)	Qualifications Gained

Professional qualifications currently held - Please give dates (e.g. Management, Marketing, etc)

Other Educational/Training Courses - Please give dates (e.g. First Aid, Health & Safety etc)



3a. PRESENT AND PREVIOUS EMPLOYMENT DETAILS

Starting with current, or most recent employment

JOB TITLE	NAME & ADDRESS OF EMPLOYER	DATES (FROM - TO)	REASON(S) FOR LEAVING	SALARY

3b. RELEVANT EMPLOYMENT EXPERIENCE / DEVELOPMENT

Please outline relevant experience that you can bring to the post and the Association based on individual roles and responsibilities you have had. Please continue on separate sheet(s) if necessary.

4a. PERSONAL EXPERIENCE / DEVELOPMENT

Please use this section to detail any other skills, knowledge, or anything else about yourself which may be relevant to the post.



4b. WHAT DO YOU THINK YOUR KEY STRENGTHS ARE?

4c. WHAT AREAS DO YOU THINK YOU NEED TO DEVELOP?

5. OTHER SUPPORTING INFORMATION

Please use this section to list any other information you think may be relevant to your application.
Please continue on separate sheet(s) if necessary.

6. OTHER INFORMATION

Current full driving licence?

Yes No

Pass date (approximate): _____

Do you have any endorsements (if yes, please give details)?

Yes No

Do you require a work permit for employment in Great Britain?

Yes No

If so, please indicate length of visit to the UK: _____

Have you had a CRB / DBS check for Disclosure of Criminal Background?

Yes No

If yes, what is the date on the disclosure? _____

The Equality Act 2010 definition of a disability is “a physical or mental impairment which has a substantial and long term adverse effect on a person’s ability to carry out normal day to day activities.”

Do you consider yourself to be disabled based on the above statement?

Yes No

If so, please state why: _____

7. ANY OTHER INFORMATION YOU WOULD LIKE TO TELL US

e.g. regular commitments/availability

8. REFERENCES

1. *Current or most recent employer*

Name:

Post:

Organisation:

Address:

Tel. No.:

Can we contact this reference prior to interview? Yes No

2. *Additional Reference*

Name:

Post:

Organisation:

Address:

Tel. No.:

Can we contact this reference prior to interview? Yes No

9. GENERAL You are required to declare any relationship with any YMCA North Tyneside employees or Board Members. Please state name, position and relationship:

10. DECLARATION

I declare that the information I have given on this form is correct and complete. False or misleading statements may be sufficient grounds for cancelling any agreements made.

If you are completing this form electronically, by typing your name in the 'signature' section, your submission will be treated as signed.

Signature: _____ Date: _____

The completed form should be returned to: **The H.R. Department, YMCA North Tyneside, Church Way, North Shields NE29 0AB. or cheryl.newton@ymcanorthtyneside.org**

If you have any difficulties, or queries regarding this form, or would like a large print version please contact the H.R. Department on: **0191 257 5434**

DATA PROTECTION The information on this form may be processed on computer to manage your application. If appointed, the information may be used for payroll, H.R. and pension purposes. For more information on YMCA North Tyneside, please visit our website: www.ymcanorthtyneside.org

YMCA enables people to develop their full potential in mind, body and spirit. Inspired by, and faithful to, our Christian values, we create supportive, inclusive and energising communities, where young people can truly belong, contribute and thrive.

SUPPORT & ADVICE

ACCOMMODATION

FAMILY WORK

HEALTH & WELLBEING

TRAINING & EDUCATION