| NOTES FOR APPLICANTS:   1. Please complete ALL sections in black ink or type and return to   alisonbirchall@bymt.org   1. Interviews will be arranged when mutually convenient |
| --- |
| POSITION APPLIED FOR: Pastoral Team or Manager, please state  START DATE: Various residential courses throughout the year |

**Personal Details**

| Surname: |  | | Forenames: |  |
| --- | --- | --- | --- | --- |
| Home Address: |  | | | |
| Postcode: |  | | | |
| Telephone (home): |  | | | |
| Telephone (work): |  | | | |
| Mobile: |  | | | |
| Email: |  | | | |
| May we contact you at work/college, with discretion? | | | | YES NO |
| Do you have any special requirements with which we can help you, in order to make application process easier for you? | | | | |
| National Insurance Number: | |  | | |
| Do you possess a current driving licence? | | | | YES NO |
| If yes, please state which type of licence is held: | | | |  |
| Please give details of any endorsements: | | | | |
| Do you own or have access to a car? | | | | YES NO |
| Do you need a work permit to take up employment in the UK? | | | | YES NO |

| Please give details of any convictions, other than those which are “spent” under the provision of the Rehabilitation of Offenders Act 1974. Failure to disclose such convictions could result in dismissal. Any information given will be treated in the strictest confidence: | | |
| --- | --- | --- |
| Are you involved in any activity, or subject to any restrictions or covenants, which might restrict your working activities? | | YES NO |
| Are you prepared to work at weekends and in the evenings when required? | | YES NO |
| Dates you are available from and to: |  | |
| Where did you hear about this vacancy? |  | |

**Education and training history**

**Secondary education qualifications**

| Subject | Level | Date |
| --- | --- | --- |
|  |  |  |

**Further education degrees and diplomas**

| Qualification | Awarding Body & level | Date |
| --- | --- | --- |
|  |  |  |

**Professional qualifications** and any other relevant studies or training you have completed or are currently undertaking.

| Qualification/Course | How Obtained | Date |
| --- | --- | --- |
|  |  |  |

**Other related activities** such as projects you have run or in which you have been involved, competitions won, etc.

| **Organisation** | **Details** |
| --- | --- |
|  |  |
|  |  |
|  |  |
|  |  |

**Employment record**

Please give details of your employment history, including your most recent employer:

| Dates | Employers name and nature of business | Position held and main responsibilities | Reason for leaving |
| --- | --- | --- | --- |
|  |  |  |  |

**Statement of application**

Please give your reasons for applying for this position and explain in what ways you meet the criteria set out in the person specification:

|  |
| --- |

**References**

Please give details of two referees. If possible, one should be from a previous employer.

**Referee One**

| Name: |  | |
| --- | --- | --- |
| Job Title: |  | |
| Address: |  | |
| Telephone Number: |  | |
| Email: |  | |
| How do you know the referee? |  | |
| May we request a reference prior to employment offer? | | YES NO |

**Referee Two**

| Name: |  | |
| --- | --- | --- |
| Job Title: |  | |
| Address: |  | |
| Telephone Number: |  | |
| Email: |  | |
| How do you know the referee? |  | |
| May we request a reference prior to employment offer? | | YES NO |

**Declarations**

| I declare that the information I have provided in this application form is, to the best of my knowledge and belief, correct and complete.  Please note: If you include any details that you know to be false or if you withhold relevant information, you may render yourself liable to disqualification from the recruitment process or, if appointed, to dismissal.  I understand these details will be held I confidence by the company for the purposes of assessing this application, ongoing personnel administration and payroll administration (where applicable) in compliance with the General Data Protection Regulations. | | | |
| --- | --- | --- | --- |
| Signed: |  | Date: |  |

| I declare that I have not been convicted, nor had any criminal proceedings against me, nor have I been warned, either orally or in writing, in relation to a sexual offence or child abuse. I know of no reason why I should be considered unsuitable for work with children. I agree and hereby consent to BYMT seeking clearance from the police once an offer of employment is made in writing to me. | | | |
| --- | --- | --- | --- |
| Signed: |  | Date: |  |

If this form is sent via email we will accept the sending of the form as legal agreement of both of the above declarations.

You may be required to sign the form if you are shortlisted for an interview.

**Equal Opportunities Monitoring**

| BYMT is committed to providing equality of opportunity, irrespective or race, colour, ethnic or national origins, gender, marital status, sexual orientation, age, disability, religious beliefs, political beliefs, economic status or class. In order to help us ensure our policy is being carried out it would help if you would complete the following details so that we can monitor applications.  Please be assured that any information you provide will be treated as confidential.  Thank you for your assistance. |
| --- |

| Gender: |  |
| --- | --- |
| Date of Birth: |  |
| Nationality:  (as on your passport: e.g. Ireland, Zimbabwe, Britain, Kazakhstan) |  |

| **ETHNIC ORIGIN**  How would you describe your ethnic origin? (please put a cross in the appropriate box): | |
| --- | --- |
| White |  |
| Middle Eastern |  |
| North African |  |
| Black African |  |
| Black Caribbean |  |
| Black Other (please specify) |  |
| Chinese |  |
| South Asian (Indian, Pakistani, Bangladeshi, Sri Lankan) |  |
| South East and Far Asian (Japanese, Malay, etc.) |  |
| Asian Other (please specify) |  |
| Mixed race (please specify) |  |
| Other (please specify) |  |

| **Northern Ireland only** | |
| --- | --- |
| Which community do you consider yourself to be part of?  (delete as necessary) | Catholic Community Protestant Community Neither |

| **DISABILITY STATUS**  (The Disability Discrimination Act 1995 protects people who have an impairment; are disabled and/or have long-term health conditions.) | |
| --- | --- |
| Do you think that you have a disability in accordance with the terms of the Disability Discrimination Act 1995? | YES NO |
| If yes, please give brief details of your disability | |