### Application Form

### Youth Worker

Please send your CV along with your completed application form to recruitment@allsaintsworcester.org.uk

Applications must be recieved by: 03/03/2024

The information you supply on this form will be treated in accordance to our GDPR data privacy policy.

**Personal Details**

|  |  |  |  |
| --- | --- | --- | --- |
| First Name: |       | Surname: |       |
|  |
| Title: |       | Prefered Phone Number: |       |
|  |
| Email Address: |       |
|  |
| Address: |       | Post Code: |       |
| National Insurance No: |   |   |   |   |   |   |   |   |   |
|  |
| Can we contact you at work?  |  |
|  |
| Are you free to remain and take up employment in the UK with no current immigration restrictions? |  |
|  |
| Do you hold a full, clean driving licence valid in the UK? (if relevant to the post)? |  |
|  |
| If you are successful you will be required to provide relevant evidence of the above details prior to your appointment. |
|  |
| Do we need to make any reasonable adjustments in order for you to attend the interview? |  |
|  |
| If the answer to the above is “Yes”, please provide details here:       |

**Employment History**

Please cover the last 5 years (most recent first) and attach a CV to this application form.

**Most Recent:**

|  |
| --- |
| Name of Employer:       |
|  |
| Business Address: |       | Post Code:      |
|  |
|  |
| Job Title: |       |
|  |  |  |  |
| Start Date: |       | End Date: |       |
|  |  |  |  |
| Salary: |       |  |  |
|  |  |  |  |
| Period of Notice: |       | Last Day of Service: |       |
|  |
| Breif description of Duties:      |
|  |
| Reason for leaving (if no longer employed):      |

**Previous Employer 2 (If applicable):**

|  |
| --- |
| Name of Employer:       |
|  |
| Business Address: |       | Post Code:      |
|  |
|  |
| Job Title: |       |
|  |  |  |  |
| Start Date: |       | End Date: |       |
|  |  |  |  |
| Salary: |       |  |  |
|  |  |  |  |
| Period of Notice: |       | Last Day of Service: |       |
|  |
| Breif description of Duties:      |
|  |
| Reason for leaving (if no longer employed):      |

**Previous Employer 3 (If applicable)::**

|  |
| --- |
| Name of Employer:       |
|  |
| Business Address: |       | Post Code:      |
|  |
|  |
| Job Title: |       |
|  |  |  |  |
| Start Date: |       | End Date: |       |
|  |  |  |  |
| Salary: |       |  |  |
|  |  |  |  |
| Period of Notice: |       | Last Day of Service: |       |
|  |
| Breif description of Duties:      |
|  |
| Reason for leaving (if no longer employed):      |

**Education**

Please list qualifications obtained:

|  |  |  |
| --- | --- | --- |
| **Name of Academic institution / University(s):** | **Course Title** | **Qualifications and grades obtained****(Undergrad upwards)** |
|       |       |       |
|       |       |       |
|       |       |       |
|  |  |  |
| **Name of College** | **Subjects** | **Qualifications and grades obtained****(A levels or equivilant)** |
|       |       |       |
|  |  |  |
| **Name of School** | **Subjects** | **Qualifications and grades obtained****(GCSEs or equivilant)** |
|       |       |       |

**Training Record**

Please list all professional, vocational and other training courses relevant to this role.

|  |  |  |
| --- | --- | --- |
| **Course Details** | **Date(s) Attended** | **Professional/Technical/****Management Qualifications** |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
| Membership of any Professional / Technical Associations (please state level of membership where appropriate):      |

**Personal Statement**

**Abilities, skills, knowledge and experience**

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| --- |
| Please use this section to explain in detail how you meet the requirements of the Job Description. Please feel free to use additional pages.      |

**Rehabilitation of Offenders Act (1974)**

|  |  |
| --- | --- |
| Do you have any convictions that are unspent under the rehabilitation of offenders act 1974? |  |
|  |  |
| If yes, please give details / dates of offence(s) and sentence:      |

**Referees**

Please give the names and addresses of your two most recent employers (if applicable). If you are unable to do so, please include a character referee. Please clearly outline who your references are.

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| Referee 1 | Reference Type |  |  |
| First Name: |       | Last Name: |       |
|  |  |  |  |
| Orginisation: |       | Job Title: |       |
|  |  |  |  |
| Address: |       |  | Post Code:      |
|  |  |
| Phone Number: |       | Email Address: |       |
|  |  |  |  |
| Are you willing for this referee to be approached prior to the interview? |  |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| Referee 2 | Reference Type |  |  |
| First Name: |       | Last Name: |       |
|  |  |  |  |
| Orginisation: |       | Job Title: |       |
|  |  |  |  |
| Address: |       |  | Post Code:      |
|  |  |
| Phone Number: |       | Email Address: |       |
|  |  |  |  |
| Are you willing for this referee to be approached prior to the interview? |  |
|  |  |  |  |

**Recruitment Monitoring Form**

This sheet will be separated from your application form upon receipt and does not form part of the selection process. It will be retained by the Human Resources purely for monitoring purposes.

|  |  |
| --- | --- |
| Application for the post of:  | Youh Worker |

**To help us ensure that our Equal Opportunities Policy is fully and fairly implemented (and for no other reason) please complete this section of the application form.**

**What is your Ethnic Group?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  | If ‘other’ please specify  |
|  White |  |  |  |       |
|  |  |  |  |  |
| Mixed |  |  |  |       |
|  |  |  |  |  |
| Asain / Asain British |  |  |  |       |
|  |  |  |  |  |
| Black / Black British |  |  |  |       |
|  |  |  |  |  |
| Chinese or other ethnic group |  |  |  |       |
|  |  |  |  |  |
| Prefer not to say |  | [ ]  |

|  |  |  |
| --- | --- | --- |
| **Gender:** |  |  |

**Disability**

Disability, according to the Disability Discrimination Act, is defined as “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 disabled?:** |  |  |

|  |
| --- |
| If yes, What is the effect or impact of your disability or health condition on your ability to give your best at work? Please write in here:Please note: the information in this part of the form is for monitoring purposes only. If you believe you need a reasonable adjustment as part of the interview process, please state this on page one of the application form      |

|  |  |  |
| --- | --- | --- |
| **Application Status:** |  |  |

|  |  |  |
| --- | --- | --- |
| **Age Group:** |  |  |

|  |  |  |
| --- | --- | --- |
| **Please state where you saw this post advertised:** |  |       |

**Declaration**

* I have declared any interests or appointments that may conflict with employment by the church / charity and the role for which I have applied.
* I understand that the church will treat any personal information in accordance with GDPR.
* I have obtained permission from all individuals I have given as referees.
* I am aware that any formal offer of employment may be subject to positive clearance of DBS if required for the role.
* I am committed to creating a safe place for children and vulnerable adults.
* I confirm that to the best of my knowledge all the information given in this application are correct and accurate.

|  |  |
| --- | --- |
| Signed (can be digital or physical): |       |
|  |  |
| Date: |       |

Candidates selected for interview will be notified within one week of the closing date. Applicants who have been unsuccessful in their application will be notified in writing within three weeks of the closing date.