

COLLECTIVE

CONFIDENTIAL: APPLICATION FORM

VOLUNTARY PROJECTS ASSISTANT

Please type or write clearly in black.

PERSONAL DETAILS

Surname	Forename(s)
Address	Postcode
Day Tel No	Eve. Tel No
Mobile Tel	Email

REFERENCES

Please give the name, address and position of two people to whom reference may be made. They should be an employer, academic referee or someone with whom you have worked or volunteered with.

	1.	2.
Name		
Position		
Address		
Tel No		
Capacity known to you		

May these references be consulted without further authority from you, if shortlisted?

1. Yes/No

2. Yes/No

EMPLOYMENT AND/OR VOLUNTARY EXPERIENCE

What is your present title?	Date started
Nature of business	Notice required

Please describe your role in the organisation and outline your responsibilities.

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Please list any other relevant appointments with the most recent first.

Name/address of employer	Position held/ Main duties	From	To	Reason(s) for leaving

EDUCATION

Secondary School	Qualifications	From	To
College/University Courses	Qualification	From	To
Other Relevant Training	Qualification	From	To

Please state the earliest you could take up the post, if it is offered to you:

Please state how you found out about the post:

EXPERIENCE

This section of the application is for you to demonstrate how you meet the requirements of the post. You should directly relate to each point in the person specification. Use examples from any previous work experience, voluntary work or other activities that you have been involved in to illustrate your suitability. Lastly please detail the reasons why you are interested in applying for the position. (Feel free to continue on a separate sheet but do not exceed 500 words).

DECLARATION

I declare that to the best of my knowledge and belief, all statements contained in this form are correct and I understand that should I conceal any material fact, I will, if engaged be liable to termination of my placement.

Signed

Date

EQUAL OPPORTUNITIES MONITORING FORM

Please complete the following details – this will not affect any decision on your application. We use the information for statistical purposes only to monitor our equal opportunities policy.

Male_____

Female_____

Date of Birth _____

What is your ethnic group? (Please circle)

1. Asian or Asian British
 - a) Bangladeshi
 - b) Indian
 - c) Pakistani
 - d) Any other Asian background (please state)
2. Black or Black British
 - a) African
 - b) Caribbean
 - c) Any other Black background (please state)
3. Chinese
4. Mixed
 - a) Asian and White
 - b) Black African and White
 - c) Black Caribbean and White
 - d) Chinese and White
 - e) Any other Mixed background (please state)
5. White
 - a) British
 - b) Irish
 - c) Any other White background (please state)
6. Any other ethnic group (please state)

Do you consider yourself disabled? (Please circle)

Yes

No