

WOMEN'STEC

Enabling women into non-traditional employment

29 Chichester Avenue, Belfast, BT15 5EH
Tel: 028 9074 9810 Email: vilma.bisson@womenstec.org

Ref: _____

APPLICATION FORM Programme Co-ordinator Promoting Opportunities: #notjustforboys

Please ensure that the information you provide shows how you meet the essential and desirable criteria as outlined in the Person Specification enclosed in the information pack.

The completed form should be returned no later than 4pm on Friday 4th January 2019.

Please complete in black ink or typescript.

PERSONAL DETAILS

Surname:	Forename(s):
Address:	Telephone No: (daytime)
	Telephone No: (evening)
	Mobile No:
	Email address if appropriate:
Please detail any sick leave in the past 3 years:	
Please indicate the period of notice in current employment required (if applicable):	

Do you have a full current driving licence? Yes No

Do you have access to a car? Yes No

If no, do you have access to another form of transport for work purposes? Yes No

Are you willing to travel throughout Northern Ireland as part of this post? Yes No

Occasional evening and weekend work will be required, for example meetings and careers events. Are you able to work flexible hours? Yes No

EDUCATION

Dates	Subjects and qualifications gained

Professional training/qualifications

Date	Course/qualification	Organising body

EMPLOYMENT HISTORY**Present Employment (if any)**

Name of present employer (or last employer)		
Post held		
Duties of post:		
Date appointed	Date left (if applicable)	Present salary

Please detail any other work experience, starting with most recent post and work backward (continue on a separate sheet if necessary)

Dates:	Employer's name and address	Job title and overview of responsibilities

RELEVANT EXPERIENCE TO THE POST

Using the Person Specification, please demonstrate how your skills, experience and abilities help you meet **each** of the **ESSENTIAL** criteria. (continue on a separate page if necessary).

RELEVANT EXPERIENCE TO THE POST

Using the Person Specification, please demonstrate how your skills, experience and abilities help you meet each of the **DESIRABLE** criteria (continue on a separate page if necessary).

Please give details of any other relevant information you feel will support your application.

REFERENCES

Please give the names and addresses of two people who would be willing to act as a referee (one should be your most recent employer). Please note that references will not be taken up prior to interview.

Name:	Name:
Organisation:	Organisation:
Address:	Address:
Post code:	Post code:
Telephone number:	Telephone number:
Position:	Position:
Capacity in which known:	Capacity in which known:

Are you eligible to work in the UK Yes No

You will be required to provide documentation to support this claim (under Section 8 of the Asylum and Immigration Act 1996) if offered the post.

Under the Disability Discrimination Act 1995 a person is considered to have a disability if he/she has or has had a physical or mental impairment which has a substantial and long-term adverse effect on his/her ability to carry out normal day to day activities.

Do you consider that you meet this definition of disability? Yes No

If yes, please state the nature or effects of your disability: _____

This information will not be disclosed prior to interview

Where did you see this post advertised: _____

DECLARATION OF CONVICTIONS
See attached - Declaration and Consent Form

DECLARATIONS Please ensure you sign and date this declaration before returning your application form.

DATA PROTECTION ACT DECLARATION - The information on the application form will be held and processed in accordance with the requirements of the Data Protection Act 1998.

I understand that the information is being used to:

- Process my application for employment;
- Form the basis of a computerised record on the recruitment system for processing and monitoring purposes;
- Form the basis of a manual job file with other application forms and will be used for processing;
- If appointed, form the basis of a manual and computerised employment record.

I declare that the information provided on this form is true and complete to the best of my knowledge and belief. I understand that any false or omitted information may result in dismissal or other disciplinary action if I am appointed.

Signature _____

Date _____

Please note:

All information received will be dealt with in confidence, consistent with our commitment to safeguard vulnerable adults

This completed application form will be kept securely for 1 year following submission or 1 year after terminating employment.

Please return the completed application form by post marked 'Private and Confidential' to:

Vilma Bisson, Quality Assurance Officer
WOMEN'STEC, 29, Chichester Avenue,
Belfast BT15 5EH

Or e-mail
vilma.bisson@womenstec.org