

APPLICATION FOR EMPLOYMENT

For the Post of:	Youthscape Programme Trainer / Mediator (3 year contract with possible extension)
Post Ref No.	YPTM 149/17
Closing Date:	Tuesday 28th November 2017 at 12 Noon

SECTION 1: PERSONAL DETAILS

Title:	Surname:
Forename:	Previous Name(s):
Address:	Telephone Numbers:
	Home:
	Work:
	Mobile:
Postcode:	E-mail:
National Insurance Number:	Teacher's Reference No. (if applicable)
Car owner/Access to a Vehicle:	Yes / No
Is your licence free from endorsements?	Yes / No

SECTION 2: SECONDARY / FURTHER EDUCATION

Awarding Body	Subject	Level e.g. GCSE, 'A', Vocational	Grade	Date

SECTION 3: UNIVERSITY / 3RD LEVEL EDUCATION

Name of University/College	Dates	Full or Part Time	Degree(s) /Other Qualifications Awarded		If Honours, State Class & Division
Subjects successfully taken in each year of main qualification	1 st Year		2 nd Year	3 rd Year	4 th Year

TEACHER TRAINING (IF APPLICABLE)

College or University	Date	Qualification(s) Obtained with level of award (if appropriate)
Subjects Studied During Training: Main Subject(s): Other Subject(s):		

ADDITIONAL QUALIFICATIONS

Please give details of Post-Graduate Degrees, Diplomas or Certificates

Date		Name of Awarding or Examining Body	Qualification/Award	Grade
From	To			

MEMBERSHIP OF PROFESSIONAL BODIES

Name of Body:	
Date of Membership conferred:	
Current Membership Status:	

SECTION 4: EMPLOYMENT**PRESENT POST**

Name & Address of Employer:		Place of Work (if different)	
Postcode:			
Job title:		Date Appointed:	
Full-time or Part-time:		Temporary or Permanent:	
Current Salary:		Current notice period:	
Summary of main duties and responsibilities:			

EMPLOYMENT HISTORY

Name and Address of Employer	Position Held	Dates: DD/MM/YYYY		Salary	Reason for Leaving
		From	To		
Brief summary of Duties:					

Name and Address of Employer	Position Held	Dates: DD/MM/YYYY		Salary	Reason for Leaving
		From	To		
Brief summary of Duties:					

EMPLOYMENT HISTORY (CONTINUED)

Name and Address of Employer	Position Held	Dates: DD/MM/YYYY		Salary	Reason for Leaving
		From	To		

Brief summary of Duties:

Name and Address of Employer	Position Held	Dates: DD/MM/YYYY		Salary	Reason for Leaving
		From	To		

Brief summary of Duties:

Name and Address of Employer	Position Held	Dates: DD/MM/YYYY		Salary	Reason for Leaving
		From	To		

Brief summary of Duties:

Name and Address of Employer	Position Held	Dates: DD/MM/YYYY		Salary	Reason for Leaving
		From	To		

Brief summary of Duties:

Please account for any break in your employment history

SECTION 5: GENERAL DETAILS

Are you related to any current employee, or member of the College Governing Body?

Yes No

If YES, please state to whom and the relationship

REFEREES (References will only be taken up at appointment stage)

(1) Present/Most Recent Employer	(2) Another work related or academic referee (not a relative or friend)
<p>Name:</p> <p>Position:</p> <p>Address:</p> <p>Telephone No:</p> <p>E-mail Address:</p>	<p>Name:</p> <p>Position:</p> <p>Address:</p> <p>Telephone No:</p> <p>E-mail Address:</p>

SECTION 6: ADDITIONAL INFORMATION – SHORTLISTING CRITERIA
PLEASE FULLY DEMONSTRATE, IN THE SPACES PROVIDED BELOW, HOW YOU MEET EACH OF THE SELECTION CRITERIA.

ESSENTIAL CRITERIA

1. Do you have a Degree (or equivalent) in a relevant discipline e.g. social science; community development; community relations; TIDES training for Trainers programme
AND
2 years' experience working in community relations;
OR 5 years paid experience in community relations and / or youth and community relations work?

Please specify:

2. Do you have minimum of 2 years' experience in successfully building effective working relationships with community groups, public representatives and statutory agencies, developing partnerships and finding positive solutions to problems including working with hard to reach groups?

Please specify:

3. Do you have minimum of 3 years' experience in directly delivering accredited training in the good relations themes including Conflict Resolution and Mediation Skill?

Please specify:

4. Do you have experience of interpreting Good Relations and Social Integration in Northern Ireland and / or in the Republic of Ireland?

Please specify:

5. Do you in depth knowledge and understanding of the equality issues and legislation and an awareness of the links between equality, diversity, community cohesion and social inclusion?

Please specify:

6. Do you have knowledge of key challenges and drivers to local peace-building initiatives?

Please specify:

7. Do you have excellent communication and ICT skills including proficiency in the use of Microsoft Office applications such as Outlook, Word, Excel and PowerPoint?

Please specify:

8. Do you have a clear understanding of and commitment to equality principles and the ability to apply them in service provision?

Please specify:

9. Are you the ability to influence others and make powerful presentations?

Please specify:

10. Do you have experience of monitoring & managing budgets in accordance with policies, procedures/ external funding requirements?

Please specify:

OTHER

11. Do you have a full current driving licence which enables you to drive in Northern Ireland and Republic of Ireland and have access to a car for official business purposes?

Please specify:

12. Do you have be available for evening or weekend work as required

Please specify:

Declaration by Applicant:

I hereby certify and declare that the information supplied by me in this application is correct to the best of my knowledge. I understand that knowingly giving false information or suppressing any material fact will lead to disqualification or, if appointed to dismissal. I further understand that prior to appointment to this post various checks including child protection, criminal conviction and bind-overs will be carried out and I hereby give my permission for this to be done.

Signature of Applicant: _____ Date: _____

CANVASSING WILL DISQUALIFY

Please ensure all sections of this form are completed including the equal opportunity monitoring form and return it by the closing date to:

**HR Office
South West College
Dungannon Campus
Circular Road
Dungannon
Co Tyrone
BT71 6BQ
or
e-mail to: hr@swc.ac.uk**

EQUAL OPPORTUNITIES MONITORING QUESTIONNAIRE FOR JOB APPLICANTS
THE INFORMATION YOU PROVIDE WILL BE TREATED AS CONFIDENTIAL
THIS MONITORING FORM MUST BE RETURNED WITH YOUR APPLICATION

South West College is committed to equality for all job applicants. The College selects those suitable for employment and promotion solely on the basis of merit and is also monitoring its activities to ensure that its equal opportunities policy is effectively implemented.

The application of equal opportunity in the College is monitored on the basis of a comparison of person of different religious belief, political opinion, racial group, age, marital status or sexual orientation, between men and women generally, between persons with a disability and those without and between persons with dependants and those without.

Access to this information will be strictly controlled and will not be available to those considering your application for employment. Monitoring will involve the use of statistical summaries of information in which the identities of individuals will not appear. Whilst the College will treat the information given in this monitoring questionnaire as confidential, applicants are advised that legal processes may require the College to disclose the information given on this questionnaire to certain statutory bodies and, in some circumstances, open Tribunal. The information will subsequently be transferred to the monitoring system operated for the College. There it will be strictly controlled in accordance with the Data Protection Act 1998.

1. Fair Employment Monitoring

South West College has a legal duty to ascertain your community background and sex under the Fair Employment and Treatment (NI) Order 1998. Regardless of whether we practice our religion, most of us in Northern Ireland are seen as belonging to either the Protestant or Roman Catholic Community. We are therefore asking you to indicate your community by ticking the appropriate box below.

I am a member of the Protestant Community

I am a member of the Roman Catholic Community

I am not a member of either the Protestant or Roman Catholic Community

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

2. Gender

Male

Female

3. Date of Birth

Day _____ Month _____ Year _____

4. Where did you see the post advertised?

Belfast Telegraph

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Local Press

<input type="checkbox"/>
<input type="checkbox"/>

Internal Trawl

<input type="checkbox"/>
<input type="checkbox"/>

College Website

NI Jobfinder

NI Jobs

On line recruitment

Other _____

5. Marital Status (Please tick only one box to reflect your current status)

Single	<input type="checkbox"/>	Divorced	<input type="checkbox"/>	Married/Civil Partnership	<input type="checkbox"/>
Separated	<input type="checkbox"/>	Widowed	<input type="checkbox"/>	Other	<input type="checkbox"/>

6. Religious Denomination

Roman Catholic	<input type="checkbox"/>	Christian	<input type="checkbox"/>	Presbyterian	<input type="checkbox"/>
Church of Ireland	<input type="checkbox"/>	Buddhist	<input type="checkbox"/>	Hindu	<input type="checkbox"/>
Methodist	<input type="checkbox"/>	Jewish	<input type="checkbox"/>	Muslim	<input type="checkbox"/>
Sikh	<input type="checkbox"/>	None	<input type="checkbox"/>		

Other (please specify) _____

7. Ethnic Group

White	<input type="checkbox"/>	Irish Traveller	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
Indian	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>
Black Caribbean	<input type="checkbox"/>	Black African	<input type="checkbox"/>		
Black Other	<input type="checkbox"/>				

Mixed Ethnic Group (please specify) _____

Other Ethnic Group (please specify) _____

8. Political Opinion

Please indicate from the list below the political party that best represents your current political opinion:

Ulster Unionist Party (UUP)	<input type="checkbox"/>	Sinn Fein	<input type="checkbox"/>
Democratic Unionist Party (DUP)	<input type="checkbox"/>	Alliance Party	<input type="checkbox"/>
Social Democratic & Labour Party (SDLP)	<input type="checkbox"/>	No political party	<input type="checkbox"/>
I prefer not to say	<input type="checkbox"/>		

Other (please specify) _____

9. Nationality

What do you consider your national identity to be? For example, Irish/British/Polish/Latvian. Please state below:

10. Sexual Orientation

Under the employment Equality (Sexual Orientation) Regulations (NI) 2003 sexual orientation means a sexual orientation towards:

- Persons of the same sex (this covers gay men and lesbians)
- Person of the opposite sex (this covers heterosexual men and women)
- Persons of both sexes (this covers bisexual men and women)

Please indicate below in relation to the above definitions your sexual orientation towards someone:

Of the same sex (this covers gay men and lesbians)

A different sex (this covers heterosexual men and women)

Of the same sex and of the opposite sex (this covers bisexual men and women)

I do not wish to answer the question

11. Disability

The Disability Discrimination Act 1995 states that a person has a disability if he/she has 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 as set out under the Disability Discrimination Act?

Yes No

Please state the type of impairment which applies to you. People may experience more than one type of impairment, in which case you may indicate more than one. If none of the categories apply, please mark ‘Other’ and specify the type of impairment.

Physical Impairment
(e.g Arthritis, Mobility impairment)

Sensory Impairment
(e.g Hearing Loss, Visual Impairment)

Learning disability/difficulty
(e.g Dyslexia, Nonverbal disability)

Mental Health condition
(e.g Mood disorders, Bipolar)

Long Standing illness
(e.g Autism, Cognitive Disorders)

Other (please specify) _____

12. Dependants/Caring Responsibilities

Do you have personal caring responsibility for the care of any of the following?

A child or children

A person with a disability

A dependent or older person

None of the above

THANK YOU FOR YOUR CO-OPERATION. THIS INFORMATION IS COLLECTED FOR THE PURPOSES OF SECTION 75 OF THE NORTHERN IRELAND ACT 1998.

Post Ref:

DECLARATION OF CRIMINAL OFFENCES: (please tick one box)

Have you been convicted of a criminal offence, cautioned or bound over or is a charge pending?

Yes

No

If yes, please give details of any convictions for criminal offences, including the nature of the offence and the length of the sentence (if any) with relevant dates or current criminal charges (if any).

NOTE: This post is exempt from the provisions of the Rehabilitation of Offenders Order 1978 by virtue of the Rehabilitation of Offenders (Exceptions) Order 1979. Applicants must therefore disclose information about convictions which for other purposes

Signed:

Date:

are 'spent' under the provisions of the Order. Failure to disclose such convictions could in the event of employment result in dismissal or disciplinary action by the College. Any information given will be completely confidential