

# EMPLOYMENT APPLICATION FORM

STRICTLY CONFIDENTIAL



Care in Crisis  
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CRAIGAVON  
BT66 8DY

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E-mail: [office@careincrisis.org.uk](mailto:office@careincrisis.org.uk)  
Web: [www.careincrisis.org.uk](http://www.careincrisis.org.uk)

**REF:**

**POSITION APPLIED FOR:  
COUNSELLING CO-ORDINATOR**

PERSONAL DETAILS			
Title	Mr/Mrs/Miss/Ms		Telephone: Day
Surname			Evening
First Name/s			
Address		Nat. Ins Number	
		Next of Kin	
		Your e-mail address:	
Postcode			

EDUCATION	
Secondary School/College/University	Qualifications Gained

OTHER QUALIFICATIONS			
Course Title/Content	Training Provider	Year	Certificate Gained

**PRESENT EMPLOYMENT DETAILS**

Name and Address of Present Employer	Job Title	
	Date Appointed	
	Days and hours worked	
Main Duties of Present Position		

PAST EMPLOYMENT HISTORY			
Past Employers Full Name and Address Details	Job Title/Duties of Post/ Reason for leaving Employment	From	To

REFEREES Please name two referees (not relatives), one of whom should have knowledge of your present work and be in a supervisory/managerial capacity.			
Name		Name	
Address		Address	
Postcode		Postcode	
Contact No.		Contact No.	
Relationship		Relationship	

What is your understanding of the Ethos of Care in Crisis?

Please demonstrate your work experience and how you feel this would equip you to carry out the responsibilities of the role of Counselling Co-ordinator (continue on a separate page if necessary)

What personal qualities do you have that would enable you to work within a team?

CONVICTIONS / OFFENCES	
Have you ever been convicted of a criminal offence	Yes / No
Are you currently the subject of police investigation or	Yes / No

do you have any prosecutions pending?	
Please list details of ALL charges, prosecutions, convictions, cautions, bind-over orders- even if they happened a long time ago. You must include any minor matters, any road traffic or motoring offences and any which may be pending.	

DISABILITY	
Do you consider yourself to have a disability which is relevant to your job application?	Yes / No
If yes, please give details.	

DECLARATION	
<ul style="list-style-type: none"> <li>• I declare that all information provided by me is correct and complete. I understand that any false, misleading or incomplete information given may result in my job offer being withdrawn or employment terminated without notice.</li> <li>• I understand that if I am offered this position I must complete an Access NI application for which Care in Crisis will issue a request for payment.</li> <li>• I understand that to take up this position I must have satisfactory references.</li> </ul>	
Signature _____	Date _____