**POSITION APPLIED FOR: Assistant/ Youth Support Worker Feb 24**

**APPLICATION FORM**

**PERSONAL PARTICULARS**

|  |
| --- |
| **NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **TEL NO. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **D.O.B \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **E-MAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **NATIONAL INSURANCE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**EDUCATION**

**School/College**

|  |  |  |
| --- | --- | --- |
| **Dates**  **from to** | **Names of schools and colleges attended** | **Examinations taken, results obtained, subjects passed** |
|  |  |  |

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| **Degree or diploma with dates & institutions attended** |
| **Dates Institutions** |

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| **PRESENT OR LAST EMPLOYER** (if any) |
| **Name and address of** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Present employer (or last employer**)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Post held**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Duties of Post:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date appointed** \_\_\_\_\_\_\_\_**Present Salary** \_\_\_\_\_\_\_\_\_\_\_\_ **Period of notice** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Leaving date if applicable:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**EMPLOYMENT HISTORY**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **DATES** | **EMPLOYERS NAME & ADDRESS** | **JOB ROLE** | **DESCRITION OF**  **DUTIES** | **REASON FOR LEAVING** |
|  |  |  |  |  |

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| **VOLUNTARY SERVICE OR COMMUNITY WORK** |
| **Please give details of any voluntary service or community work that you have undertaken on an unpaid voluntary basis:** |

**Technical, Professional or Occupational Training relevant to your application.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date** | **Type of Training** | **Subjects Studies** | **College, Firm, Institute** | **Qualifications Gained** |
|  |  |  |  |  |

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| **RELEVANT EXPERIENCE TO THIS POST** |
| **Using the Personnel Specifications, how do your skills, experience and abilities relate to this post:** |

|  |  |
| --- | --- |
| **Do you hold a current Driving Licence? YES / NO \*Delete as appropriate**  **Are you a car owner? YES / NO Driving Licence Number\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **HEALTH - Have you had any operations or serious illnesses or accidents**  **If so give details \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Are you a registered disabled person? YES / NO \***  **Registration Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Have you been convicted of any Criminal Offence? YES / No \***  **If yes, state nature of offence and sentence\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **REFERENCES - Give names and addresses of two persons (not relations) one of whom should be your most recent employer.** | |
| **1 Name**  **Occupation** | **Address** |
| **2 Name**  **Occupation** | **Address** |

**Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**This form when complete should be emailed to: hannah@lisburnymca.com**

### DECLARATION

**NOTE** The employer reserves the right to interview only candidates who meet the specified criteria. Short-listing will be based only on the information supplied by the candidate on this application form.

**WARNING** An employee found to have knowingly given false or inaccurate information, or to have wilfully failed to disclose any relevant fact, will be dismissed.

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **DECLARATION OF CRIMINAL CONVICTIONS**

The nature of the job for which you are applying will bring you into direct contact with children and young people, either as service users in their own right or the children of service users

Accordingly this post is exempt from the provisions of the Rehabilitation of Offenders Act 1974. Therefore you are required to disclose information about all criminal convictions, both current and spent.

Declaration of a conviction will not necessarily mean disqualification from appointment. However, if it is subsequently found that you failed to declare a conviction, this will be regarded as gross misconduct, which could lead to your employment being terminated.

If your application is successful, the YMCA reserves the right to carry out a criminal background check through AccessNI.

The information you provide will be used solely for the purposes of this recruitment exercise and will be used for no other purpose.

Name:

# Post applied for:

Please give details, including date, offence and sentence of all criminal convictions [spent *and* unspent] below:

*If none, please write none and sign and date*

Signed

Date