

Post reference No: Mourne/PS002

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| PLEASE NOTE – FAILURE TO FULLY COMPLETE THIS FORM MAY LEAD TO REJECTION OF YOUR APPLICATION AT SHORTLISTING It is not Bolster Community policy to acknowledge receipt of application forms.  You will be advised, however, of the outcome of your application.  CVs will not be accepted.  Please quote the **Applicant reference number** on any correspondence relating to this post. |  | **Position Applied for: Project Support Temporary PT until March 2026)** |
|  | PLEASE RETURN COMPLETED FORMS TO:  **Mourne Sure Start Project Manager, The Seashell Centre, 18 Newcastle Street Kilkeel BT34 4AF**  **Or via email to:** [**brenda@mournesurestart.com**](mailto:brenda@mournesurestart.com)  **By: 12 noon, 27th June 2025** |
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**IT SHOULD BE NOTED THAT APPLICANTS SHOULD CLEARLY DEMONSTRATE EVIDENCE OF A MINIMUM CRITERIA IN THEIR APPLICATION. APPLICANTS SHOULD ALSO NOTE THAT ONLY INFORMATION CONTAINED IN THE APPLICATION FORM WILL BE CONSIDERED AT SHORTLISTING STAGE. Please Note: Bolster Community has the right to apply desirable criteria as a short listing method.**

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| Surname: | Title: Mr/Mrs/Miss/Ms. etc. | |
| Forename(s): | | |
| Maiden Name (if applicable): Or any other previous surnames | |  |
| Address for Correspondence: | |  |
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| Postcode: | Tel. No: | |
| Nationality – Please circle appropriate  EC Member State Non EC Member State    If non EC please state nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| National Insurance Number | | |
| Current Driving License: Yes No  Access to Transport to fit the needs of this role: Yes No | | |

##### General Education

**PLEASE DO NOT ENTER NAMES OF SCHOOLS, DATES ONLY**

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|  | From | To |
| Primary School |  |  |
| Secondary School |  |  |

**Examinations Passed**

| CSE | | |  | GCE ‘O’ LEVEL | | | | | |  | GCSE | | |
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| Subject | **Grade** | Year |  | Subject | | **Grade** | | | Year |  | Subject | **Grade** | Year |
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| I.T. Qualification | | | | | | |  | ‘A’ Level | | | | | |
| **Subject** | | **Grade** | | | **Year** | |  | **Subject** | | | | **Grade** | **Year** |
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##### Further Education

| Degree/Diploma/Certificate | Year Obtained | Examinations yet to be taken (if any) |
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##### Professional Qualifications

**APPLIES ONLY TO PROFESSIONALLY QUALIFIED STAFF**

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| Name of Professional Body | **Part No. with**  **Date and Result** | **Final with Date**  **and Result** | **Enrolment Reg. No./Pin No.**  **DATE OF EXPIRY** | Examinations yet to be  **taken (if any)** |
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##### Employment History – Present Post

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| Employer: |
| Address: |
| Telephone Number: |
| What period of notice does your employer require? |
| Current Position Held: Salary: |
| Date appointed: |
| Reason for leaving: |

Present duties and responsibilities: (continue on separate sheet if necessary)

**The following section is where you relate your qualifications, experience, skills and qualities to those that Bolster Community require for this post as described in the Personnel Specification included in your applicant pack**. **Please give concise and relevant responses.**

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| **ESSENTIAL** |
| **CIRCUMSTANCES** |
| **1a.** Ability to work with flexibility in order to meet the needs of the role, including evening and weekend hours when necessary.  Please provide detailed information demonstrating how you meet this criterion (250 words maximum) |
| **2. QUALIFICATIONS** |
| **2a. Qualifications:** QCF/NVQ Level 2 or equivalent/higher qualification in Education, Childcare, Social Care or Health related subject.  Please provide detailed information demonstrating how you meet this criterion (250 words maximum). |
| **3. SKILLS AND EXPERIENCE** |
| **3a**. At least 1 years’ experience of working in a family support, general health, education or social care setting or within other areas of community development projects.  Please provide detailed information and examples demonstrating how you meet this criterion (250 words maximum). |
| **3b.** Excellent communication skills including written, verbal and digital - with an ability to interact with a wide range of people. |
| **3c.** Good planning organisational and record keeping skills. |
| **3c**.Ability to work independently (organising time effectively) and as part of a team.  Please provide detailed information and examples demonstrating how you meet this criterion (250 words maximum) |
| **DESIRABLE** |
| **4a.** Experience of working in a SureStart Project.  Please provide detailed information demonstrating how you meet this criterion (250 words maximum) |
| **4b.**  Experience of contributing to group work and/or delivery of evidence-based programmes for parents and children.  Please provide detailed information demonstrating how you meet this criterion (250 words maximum) |

**Previous Employment**

Start from when you left school/college/university and end with your most recent employment. Please provide details in chronological order of previous posts held (continue on blank page if necessary).

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| **Employer** | **Job Role** | **Dates**  **From To** | | | | | |
|  |  |  | **Month** | **Year** |  | **Month** | **Year** |
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**Account here for any time since leaving school/college/or University not already covered**:

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**Referees**

Please name two referees, not relatives, one at least of whom should have knowledge of your present work and be in a supervisory/managerial capacity and who will be contacted for a report (or at school if you have not previously been employed). References shall be sought after short-listing.

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| **1.** | **Name:** |
|  | **Address:** |
|  | **Postcode:** |
|  | **Designation/Occupation: Telephone Number:** |

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| **2.** | **Name:** |
|  | **Address:** |
|  | **Postcode:** |
|  | **Designation/Occupation: Telephone Number:** |

If you have not named your current employer (or if unemployed your previous employer) please state why:

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**Medical History**

Please give brief details and approximate dates of any periods of sickness during the past 2 years.

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| **Reason for Sickness Length of Absence from Work** |
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If you have any planned holiday arrangements please indicate:

From: To:

**Bolster Community is under no obligation to make special arrangements to suit planned holidays but will, where possible, endeavour to do so.**

**Supplement to Application Form**

The Disability Discrimination Act 1995 came into effect on 2 December 1996. In line with this legislation it is necessary for employers to consider making reasonable adjustments to accommodate a person with a disability. Recruitment and Selection will continue to be made on the basis of the merit principle however in some instances it may be necessary to consider a person’s disability and its impact upon the individuals’ ability to compete on equal terms with a non-disabled person.

In line with the Disability Discrimination Act 1995, a disability is defined as:

*“a physical or mental impairment which has a substantial and long term adverse*

*effect on your ability to carry out normal day to day activities”*

Do you consider yourself to have a disability which has an impact on the post you have applied for?

YES NO

(*Please provide appropriate details*)

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If you have answered yes to this question, is there any reasonable adjustment which you believe is necessary for Bolster Community to make to allow you to fulfil the requirements of the job for which you are applying, in full:

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Do you require any special arrangements to be made for your selection interview:

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**THIS INFORMATION WILL BE AVAILABLE TO THE SELECTION PANEL AND WILL BE USED ONLY TO ASSIST THE PANEL IN MAKING AN INFORMED DECISION AS TO BOLSTER COMMUNITY’S ABILITY TO MEET YOUR NEEDS.**

**Rehabilitation of Offenders (Exceptions) Order N.I. 1979**

Do you have any prosecutions pending or have you ever been convicted at a court or cautioned by the police for any offences: YES/NO \* *(delete as appropriate)?*

(The answer to this question requires information about all convictions such as those relating to traffic offences, etc which are regarded as a criminal offences)

If yes, please give details including the offence and date and place of court hearing.

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Is there any reason why you cannot work in regulated activity: YES/NO \* (*delete as appropriate)?*

*Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Please provide signature)*

*Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**In the event of employment, failure to disclose all previous convictions will result in dismissal or disciplinary action. All information will be treated in confidence and will only be taken into account when absolutely necessary.**

Please note, for posts that will involve substantial access to children/or adults with a learning disability the preferred applicant will be subject to a pre-employment consultancy service check. If you have not lived at present address for the past five years, please state any previous address/addresses:

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| --- | --- | --- |
|  |  | Dates |
| Address 1 |  |  |
| Address 2 |  |  |

Please note successful applicants will be required to have an AccessNI enhanced disclosure to assist with the decision-making process. A copy of the AccessNI Code Of Practice is available to view or download at the following link: <https://www.nidirect.gov.uk/publications/accessni-code-practice>

Please be advised that a criminal record will not necessarily be a bar to obtaining a position

Bolster Community has a written policy on the recruitment of ex-offenders.  A copy is available to all applicants on request

**Declaration and Signature**

The foregoing particulars are complete and correct to the best of my knowledge and belief.

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| **Warning: A candidate found to have knowingly given false information or to have wilfully suppressed any material fact will be disqualified or, if appointed, dismissed. Only applications containing all the information sought will be considered.** |

I hereby confirm that the information included in this application form is a true accurate account.

I understand that an ACCESS NI check must be carried out before my appointment can be confirmed. This has been explained to me and I am aware that spent convictions must be disclosed. I declare that the information I have given is accurate and I consent to the check being made.

I understand that the appointment is subject to receipt of satisfactory references.

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| Signature: | Date: |