

# **ARDMONAGH FAMILY & COMMUNITY GROUP**

## **APPLICATION FORM**

Please return to: Administration Officer 61 – 63 Ardmonagh Gardens Belfast, BT11 8DX TEL: 028 9024 5943 FAX: 028 9024 9125

How did you come across this Position e.g. V	Vord of Mouth, Facebook, Indeed:
Position Applied for:	Title (Mr, Mrs, Miss, Ms, etc):
Surname:	First Names:
Home Address:	Home Telephone No:
	Mobile Telephone No:
National Insurance Number:	Email Address:
Are you NISCC registered?	NISCC Number:
Yes No	
Nationality:	Do you hold a current full driving licence valid in the UK?
EC Non EC	Yes No No
If Non EC Please Specify:	Do you have access to a motor car?
	Yes No

Please name two referees (not relatives) one of whom should have knowledge of your present or most recent work and be in a supervisory/managerial capacity.		
Name:	Name:	
Occupation:	Occupation:	
Address:	Address:	
Telephone Number:	Telephone Number:	

Subjects Passed	Level/Stage E.g. GCSE/'A' Level, RSA, Diploma	Grade Obtained	Year Qualification Obtained

EMPLO	YMENT HISTORY	
Please list all your employment histo recent post. An explana		
Name and address of employer:	Date From:	Date To:
Email & Contact Number:	I	
Position Held:		
Main Duties:		
Reason for leaving:		
Name and address of employer:	Date From:	Date To:
Email & Contact Number:		
Position Held:		

Main Duties:

**Reason for leaving:** 

Name and address of employer:	Date From:	Date To:
i tame and address of employer:	Date Prom.	Date 10.
Email & Contact Number:		
Position Held:		
Main Duties:		
Main Duties:		
Reason for leaving:		
iteuson for reaving.		
Please give details of any relevant work ex	norionco (noid or volum	tary) that will sunnart
you in the application and give evidence th		a.
Please be specific and detail the sections, a	s below:	
Education/qualifications		
Knowledge skills and abilities		
Personal attributes		
Please give a statement in support of your	application. This shoul	d include details of any
relevant experience and courses attended.		

Leisure Activities: (Sport, hobbies etc)

<b>ABSENCE RECORD</b>
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Please give brief details and approximate dates of any periods of sickness during the past 2 years

Date From – To	No. of days	Reason For Absence
Ardmonagh Family & Comm	hity Group rese	rves the right to verify the above information
with your current or previous	• 1	ives the right to verify the above information

CRIMINAL CONVICTIONS
Have you ever been convicted of any criminal offence which is not treated as 'spent' under the Rehabilitation of Offenders (NI) Order 1978? This must include any motoring offences    Yes No
If you have answered Yes, please indicate the nature of the offence and the date of conviction.
Is there any reason why you cannot work in a regulated activity Yes $\Box$ No $\Box$
A criminal record will not necessarily be a bar to obtaining a position.

Updated 2024

#### Ardmonagh's Commitment of Equality

To deliver Ardmonagh's commitment to equality of opportunity both in the provision of services and as an employer. All staff are expected to promote equality in the work place and in the service Ardmonagh Family & Community Group delivers.

#### **Additional Information:**

As of the new data protection regulations from 25<sup>th</sup> May 2018, all information we hold on you will be kept in a locked filing cabinet and used solely for the purpose of processing wages. We will not share your information with anyone unless first gaining your permission. If you cease employment we will retain your information for 3 years, it will then be destroyed.

The post will be offered subject to satisfactory references, Access Ni check and ratification by the Management Committee. Please check website below for further information on Access Ni Checks and read the code of conduct.

### AccessNI Code of Practice (nidirect.gov.uk)

We have policies on ex-offenders and data retention available in the office on request.

There will be a six-month probationary period on commencement of employment and if necessary, a further six month probationary period may be put in place.

A yearly disclosure will be required in relation to criminal offences and access NI checks will be completed two yearly.

#### **Declaration:**

I certify that all particulars are correct and understand that should any false statements / omissions be made on this form Ardmonagh Family & Community Group reserves the right to dismissal.

Signature of applicant \_\_\_\_\_

Date: \_\_/\_\_/