

The following information will be treated in the strictest confidence.

PERSONAL

(Please complete this section in BLOCK CAPITALS and in black ink - The front page will be removed for equality purposes)

Surname:				First			
				Name(s):			
Address:							
Postcode:		E	mail				
			Address:				
		•					
Home Tel. No.:				Mobile Tel. No	.:		
Work Tel. No. (if				National Insura	ance		
appropriate):				No.:			
Are you involved				availability to w	ork or	YES/NO	
your working hou		l governme	ent?				
If YES, please giv	e full						
details. Are you able to work overtime and weekends as part of your usual working YES/NO YES/NO							
_	ork overtime	e and week	ends as part of	your usual wor	king	YES/NO	
hours?	C l			1			
Please give detail	s or any nou	irs wnich yo	ou would not				
wish to work.	vistions (atl	aar than an	ant convictions	under the		VEC/NO	
Have you any convictions (other than spent convictions under the YES/NO						YES/NO	
Rehabilitation of Offenders Act 1974)? If YES, please give full							
details.	Ciuii						
Are you willing to undergo an enhanced criminal record check by the YES/NO							
Disclosure and Barring Service?						. 25, 113	
Are you prepared to undergo a medical examination prior to employment?						YES/NO	
Have you ever worked for NE Youth or any other County						YES/NO	
Association/Fede	ration associ	ated with t	he organisation	Ambition?		·	
Are you related to any person employed by NE Youth?					YES/NO		
If YES, please giv	e full						
details.							
Have you applied for employment with NE Youth before?					YES/NO		
Do you need a work permit to take up employment in the UK?						YES/NO	
How much notice are you required to give to your current employer?							

EDUCATION

Schools attended since age 11	From	То	Examinations and Results				
College or University	From	То	Courses and Results				
Further Formal Training	From	То	Diploma/Qualification				
Job related Training Courses	Date		Subject				
Name of Organisation							
Please give details of membership of any technical or professional associations.							
. 15455 g. 15 details of membership of any teermied of professional associations.							

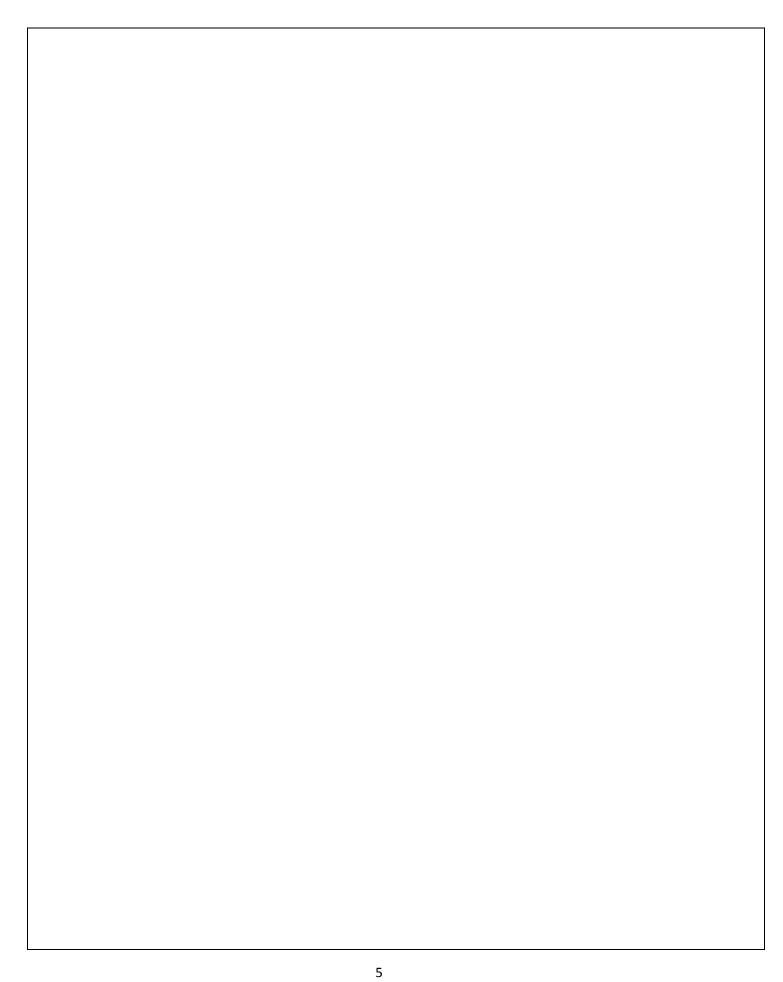
EMPLOYMENT DETAILS

Please give details of your past employment, excluding your present or last employer, stating the most recent first.

Name and address of employer	Dates	Position held/Main duties	Reason for leaving

PRESENT OR LAST EMPLOYER

Are you currently employed? YES/NO						
Name of present or last employer:						
employer.						
Address:						
Telephone No.:						
,						
Job title and a brief description of your duties:						
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Length of Salary or						
service (include dates): wage:						
udics).						
Reason for leaving or wishing to leave this						
employment:						
INTERESTS, ACHIEVEMENTS, LEISURE ACTIVITIES (e.g. hobbies, sports, club memberships)						
PERSONAL STATEMENT Please set out your reasons for applying for this post, and the qualities you would bring to the role. (You may wish to continue on a separate sheet).						



REFERENCES
Please give the names of two people who we may approach for a reference prior to interview. (Note that a confirmed offer of employment will also be dependent on a satisfactory reference
from your current/most recent employer who we will approach once you have granted us
permission to do so)
Name:

Job Title: Address:

Tel.: Email: Capacity known:

Name:

Tel.: Email:

Capacity known:

Job Title: Address:

DECLARATION

I declare that the information given in this form is complete and accurate. I understand that
any false information or deliberate omission will disqualify me from employment or may render
me liable to summary dismissal.

Signed	 	 	
Date	 	 	

Please return a completed and signed form to: Johnp.wallsendboysclub@gmail.com
If you would like an informal discussion about the role please call 0191 2639490