Application for the Post of Church Administrator in the Parishes of St Nicholas’ Allestree & St Paul’s Quarndon.

• Please complete this form electronically, (paper copies are acceptable please complete in black ink).

• Please complete all sections. Use additional sheets if necessary. You are welcome to include a CV.

• Please do not leave chronological gaps without explanation.

• All information will be treated confidentially and in accordance with data protection guidelines.

• Please return this form to the St Nicholas Church Office, 2 Lawn Avenue, Allestree or email to stnicksallestree@outlook.com.

| Surname |  |
| --- | --- |
| First Name(s) |  |
| Address |  |
| Telephone No |  |
| Mobile No |  |
| Email Address |  |
| National Insurance No |  |
| References: please include your current or most recent employer. These should not be close personal friends or relatives. We will only approach referees if you are shortlisted, and with your prior consent. |
| Referee 1Name:Address:Email:Telephone:Relationship:Period known: | Referee 2Name:Address:Email:Telephone:Relationship:Period known: |
| 1. Employment history: please include name of employer, post held, length of service, specific achievements, salary and reason for leaving.Please start with your present employment: |
| 1. Education: please include qualifications and dates (post primary):
 |
| 1. Vocational courses taken and qualifications gained:
 |
| 1. Hobbies, interests or organisations that you belong to, etc:
 |
| 1. Church background and personal faith in God
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| Rehabilitation of Offenders ActUnder the provisions of the Rehabilitation of Offenders Act, you do not have to disclose information on certain convictions after a set period of time, as they become ‘spent’.Have you ever been convicted of a criminal offence? Yes / NoDo you have any criminal charges or summonses pending against you? Yes / NoHaving a criminal record will not necessarily bar you from working with us. |
| To comply with the Equality Act 2010, please specify any reasonable adjustments, due to disability, to enable you to attend an interview, or which you wish us to take into account in considering your application |
| Where did you hear about this vacancy? |

I confirm that the information contained on this application form is, to the best of my knowledge, correct and accurate. I agree to the information being processed in accordance with the Data Protection Act.

Signed : …………………………………

Dated : …………………………………..