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| Application Form for Ignite Elim Church, Lincoln |

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| **Section 1 Personal Details** |

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| --- | --- |
| Full Name: |  |
|  |  |
| Maiden/Former Name(s) |  |
|  |  |
| Address: |  |
|  |  |
|  |  |
| Postcode: |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Daytime Tel No: |  |  | Evening Tel No: |  |
|  |  |  |  |  |
| Mobile Tel No: |  |  | E-mail Address |  |

If you have been at the address above for less than five years please give previous address(es) and dates on an additional sheet of paper.

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| **Section 2 Employment Details** |

Please list chronologically starting with current or last employer

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employers Name and Address** | **Date From** | **Date To** | **Job Title and Brief Description** | **Reason for Leaving** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Continue on a separate sheet if necessary

Are you currently involved in children’s/youth work with any other organisation Yes No

If yes please give details:

|  |  |
| --- | --- |
| Name of organisation: |  |
|  |  |
| Contact person name: |  |
|  |  |
| Address: |  |
|  |  |
| Postcode |  |
|  |  |
| Telephone number: |  |
|  |  |
| Post employed/ volunteering in: |  |

If you have previously been involved in children’s/youth work with any other organisation, please give details:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Organisation Name and Address** | **Date From** | **Date To** | **Brief Description** | **Reason for Leaving** |
|  |  |  |  |  |
|  |  |  |  |  |
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Continue on a separate sheet if necessary

Have you ever had an offer to work with children, young people or Yes No

vulnerable adults declined?

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| --- | --- |
| If yes, please give details |  |

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| **Section 3 Experience** |

Please tell us about your experience of serving and growth, try to use a story to explain your answer.

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| **Tell us about your experience in serving the local church.** |  |
| **Tell us about your experience working in a local community.** |  |
| **Tell us about how you’ve been mentored.** |  |
| **Tell us about your feelings regarding spirituality.** |  |
| **Tell us about your experience working with people that have disabilities.** |  |

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| **Section 4 References** |

Please give the names and contact details of two people who would be willing to provide you with a personal reference and have known you for at least two years. We reserve the right to take up character references from other people if deemed necessary.

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| --- | --- |
| Name: |  |
|  |  |
| Address: |  |
|  |  |
| Postcode |  |
|  |  |
| Telephone number: |  |
|  |  |
| Relationship: |  |

|  |  |
| --- | --- |
| Name: |  |
|  |  |
| Address: |  |
|  |  |
| Postcode |  |

|  |  |
| --- | --- |
|  |  |
| Telephone number: |  |
|  |  |
| Relationship: |  |

Please complete the attached self-declaration form, place it in a sealed envelope and return it to the person named on the form with whom you are welcome to discuss any aspects of this procedure.

This position will be subject to a Criminal Records Bureau Disclosure.

The information in this application will be kept confidential unless requested by an appropriate authority.

I confirm that:

The information submitted is correct and complete

I understand and agree to the conditions involving a Disclosure check

I have sent the self-declaration form to the recruiter in a separate, sealed envelope

|  |  |
| --- | --- |
| Signed |  |
|  |  |
| Date |  |