

EMPLOYMENT APPLICATION FORM



Please Note: Due to the nature of the work for this post, it is exempt from the provisions of section 4 (2) of the Rehabilitation of Offenders Act 1974 (exceptions) Order 1975, and Exceptions (amendment) Order 1986. It therefore attracts an enhanced disclosure from the Criminal Records Bureau. **The relevant forms will be sent if your application is successful.**

Please fill in as much of the application form as possible. If you need to continue on a separate sheet for any of the questions, please attach it to your application.

Please indicate which position you are applying for:

| | |
|---|---------------------|
| First Name: | Phone(Home): |
| Last Name: | Phone(Mob.): |
| Address: | Email: |
| Postcode: | Male/Female |
| Are you a British Citizen? Yes/No | Ethnicity: |
| If No, Do you have a work permit? Yes/No | |

EDUCATION

Name of School:
Leaving date:
Main Exams Passed:

Name of College/University (If Applicable):
Dates Attended:
Course Studied:
Qualification gained:

Other relevant qualifications, training or courses attended:

Present Occupation:

What are your longer term plans as regards to career/job/study?

WORK EXPERIENCE

Please list your most recent jobs (paid and unpaid).

| Employer | Job Title | Main Responsibilities | Dates & Reason for leaving |
|-----------------|------------------|------------------------------|---------------------------------------|
| | | | |
| | | | |
| | | | |

WHY DO YOU WISH TO WORK FOR SPRINGBOARD FOR CHILDREN?

WHY DO YOU THINK YOUR BACKGROUND, EXPERIENCE AND SKILLS EQUIP YOU FOR THIS POST? (Refer to the details set out in the job description (esp. knowledge and experience) to help you answer this question)

WHAT DO YOU THINK ARE YOUR STRENGTHS AND WEAKNESSES IN APPLYING FOR THIS POST?

IF YOUR APPLICATION IS SUCCESSFUL, WHEN WOULD YOU BE ABLE TO START AT SPRINGBOARD FOR CHILDREN?

How did you hear about this vacancy?

Do you have any long-term health issues which could affect your work with us?

Disability Discrimination Act 1995

Do you consider yourself to be disabled under the Disability Discrimination Act?

Yes/No

If Yes, are there any adjustments that you think we could make to overcome a Disability in relation to the essential requirements of this job?

Yes/No

If Yes, please provide further details

If selected for Interview, do you require any assistance/adaptations to help you attend?

Yes/No

If Yes, what assistance/adaptations do you require?

Do you have a current enhanced CRB disclosure, allowing you to work with children? Yes/No

(If yes, we must see a copy)

REFEREES

Please give the name and full address of two people (not relatives) who we can contact to provide Springboard for Children with a reference.

One of these must be a Professional/Academic reference from your most recent work or study (can be voluntary work), and at least one should be a personal reference from someone who has known you at least three years.

References are only taken up if you are successful at interview stage.

Professional/Academic Referee

Personal Referee

Name:

Name:

Address:

Address:

Postcode:

Postcode:

Phone:

Phone:

Their occupation:

Their occupation:

IS THERE ANY FURTHER RELEVANT INFORMATION TO ADD IN SUPPORT OF YOUR APPLICATION?

Signed: _____ Date: _____

Please send completed applications to carolthomson@springboard.org.uk

Or Post to:

**Carol Thomson
Springboard for Children
4 Bedlam Mews
London, SE11 6DF**