#### Onside LogoAPPLICATION FORM



## **PART A: PERSONAL INFORMATION**

|  |  |
| --- | --- |
| Position applied for |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Surname (block capitals) |  | Title: |  |
| Preferred first name |  | | |
| Names in full (block capitals) |  | | |
| Address (including postcode) |  | | |
| Phone (for us to contact you) |  | | |
| Email: |  | | |
| Are you eligible to work in the UK? |  | | |
| National Insurance number |  | | |

### **PART B: PERSONAL PROFILE**

Please summarise in no more than 120 words, why you believe you are suited to this position. (You will be able to expand on your experience, competencies and qualifications in Parts C, D and E.)

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### **PART C: EDUCATION & TRAINING**

Based on the Person Specification, please list education, training, any relevant professional qualifications and membership of professional organisations below.

|  |  |  |  |
| --- | --- | --- | --- |
| Date | Subject | Awarding Body | Qualification/Grade |
|  |  |  |  |

*Please continue on an additional sheet if necessary (or extend table)*

#### PART D: EMPLOYMENT HISTORY

Starting with your current/most recent employment.

|  |  |  |  |
| --- | --- | --- | --- |
| Dates  Start & Finish | Employer  Name & Address | Job Title, Main Responsibilities  Major Achievements | Final Salary, Reason for Leaving |
|  |  | Job Title: | £ |

**PART E: INFORMATION TO SUPPORT YOUR APPLICATION**

Looking at the role profile, please explain how your skills, knowledge and experience meet the requirements of the job role. Additionally, please add any further relevant information to support your application. PLEASE LIMIT YOUR RESPONSE TO ONE PAGE.

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#### PART F: REFERENCES

*Please give the names and addresses of two people whom we may contact for a reference. Please note that Legacy Youth Zone reserves the right to contact any of your former employers. References given should cover the last 5 years of your employment. The first of your references must be your present employer. If you are unemployed, this should be your last employer, or if this is your first job, your headteacher or college tutor. Personal references (e.g. from your GP or friends) are not acceptable*.

|  |  |  |
| --- | --- | --- |
|  | CURRENT EMPLOYER | SECOND REFERENCE |
| Name |  |  |
| Job title |  |  |
| Organisation |  |  |
| Address |  |  |
| Phone |  |  |
| Email |  |  |

|  |  |
| --- | --- |
| How do you know your second referee? |  |
| Can we take up your references before interview? |  |

#### PART G: GENERAL

|  |  |  |
| --- | --- | --- |
| REHABILITATION OF OFFENDERS ACT 1974  *Owing to the nature of the work, the youthwork profession is exempt from the previous provisions of the above Act. Therefore, applicants are not entitled to withhold information about convictions which for other purposes are ‘spent’ under the provisions of the Act. Legacy Youth Zone has the facility to check for convictions.* | | |
| Have you at any time been convicted of a criminal offence? | |  |
| If ‘Yes’, please give details in strict confidence.  *If completing this form at a job fair, please ask for an envelop so that your application can be sealed.* |  | |
| How did you find out about this position? |  | |
| Do you hold a current full driving licence? |  | |
| How long have you held this licence? |  | |
| Please give details of current endorsements or driving convictions: |  | |
| If appointed, how soon could you join us? |  | |

**PART H: AVAILABILITY**

*Legacy is open for young people when schools are closed. You will work with a range of young people aged from age 8 to19 and up to aged 25 with a disability.*

*Please tick to confirm you are available for the shifts advertised on the job description for the post you have applied for.*

###### **PART I: DECLARATION**

|  |  |  |  |
| --- | --- | --- | --- |
| I confirm the information given on this form is correct and complete. I acknowledge that misleading statements may be grounds for cancelling any agreements made. I understand that an Enhanced Disclosure will be sought in the event of a successful application. | | | |
| Signed: |  | Date: |  |

If you are sending this form electronically, you will be asked to sign it if you are invited for interview.

**Please save the application as your full name and submit it by email to Legacy Youth Zone, Recruitment Team:**  [[recruitment@legacyyouthzone.org](mailto:recruitment@legacyyouthzone.org)](mailto:%20jane.vickers@futureyouthzone.org)

For information regarding how OnSide youth Zones processes your data, please click here: <https://www.onsideyouthzones.org/applicant-privacy>