

PRIVATE & CONFIDENTIAL

ST MARK'S CHURCH

C/o The Vicarage, 4 St Mark's Crescent,
Broomhill, Sheffield, S10 2SG.

APPLICATION FORM

WORKER WITH STUDENTS & YOUNG ADULTS
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Family Name (BLOCK CAPITALS)	Preferred form of address (eg Mr, Mrs, Ms, other)	Other Names in full
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Permanent Address:	Temporary Address:
Telephone No. Office: Home:	Telephone No.
E-Mail:	

IMMIGRATION STATUS: For compliance with current immigration regulations, do you require a work permit before taking up paid employment?:	YES / NO
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THIS APPOINTMENT WILL BE SUBJECT TO: <ul style="list-style-type: none">• MEDICAL FITNESS FOR THE POST• ROUTINE CHECK THROUGH CRIMINAL RECORDS BUREAU
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<p>Please give details of the number of days you have been ill and/or incapable of work or usual daily living activities over the last 2 years:</p> <p>No of days How many occasions?:</p> <p>Further details may be added if you wish:</p>
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YOUR PREVIOUS EDUCATION AND EMPLOYMENT

Please provide details, including results of all examinations or professional qualifications taken, or to be taken:

Secondary Schools & FE Colleges	From	to	Subjects studied and examination results gained
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Higher Education Universities/Colleges	From	to	Details of examination results and qualifications gained
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Please provide details of any employment undertaken within the last three years:

Dates		Name and address of employer	Position Held	Brief description of responsibilities	Reasons for leaving
from	to				

ABOUT THIS POST

Please explain why you have applied for this post.

What qualities and relevant experience would you bring to this post?

Please provide evidence of your ability to work in a team as well as by yourself.

ABOUT YOU

What have you discovered about God that you would wish to share with others?

Please use this space to supply details of your passions and interests.

Please use this space to provide any additional information to support your application.

Are you a member of the Church of England?

YES/NO

If not, please indicate whether you belong to any other Christian Church or Religious Body.

YOUR REFERENCES

Please supply the names and contact details of two persons willing to provide references on your behalf (one must be your present or last employer). Please confirm with them that they are willing to act as referees and are able to do so in the coming weeks.

Please note, references will only be taken up for candidates short-listed for interview.

Name

Address

Phone..... Email

Post held

Name

Address

Phone..... Email

Post held

DECLARATION

To the best of my knowledge, the information supplied above is accurate and true.

Signed Date

Please return the completed form (hard copy or digital version) to:

Rev'd Dr Ian Wallis
The Vicarage, 4 St Mark's Crescent
Sheffield, S10 2SG

ian@stmarkssheffield.co.uk

Closing date: Saturday 30 June 2012.