**Application Form**

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| **Post:** | **Vine Church Administrator** |
| **Return completed form to:** | [mail@thevinechurch.net](mailto:mail@thevinechurch.net) Or Mail to Mr Aaron Dowds, The Vine Church, 131 Garvock Hill, Dunfermline, KY11 4JU. |

**Employment history**

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| --- | --- | --- | --- |
| **Present post:** | | **Job title:** | |
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| **Employer:** | | **Date started:** | |
|  | |  | |
| **Salary and benefits:** | | | |
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| **Major duties and responsibilities:** | | | |
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| **Previous posts (please start with the most recent)** | | | |
| **Job title:** | **Employer:** | **Dates (from-to):** | **Salary:** |
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**Education/training**

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| **Secondary education:** | **Qualifications/grade:** |
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| **Further/higher education:** | **Qualifications/grade:** |
|  |  |
| **Other relevant training, professional qualifications or work related skills (for example languages, shorthand, etc):** | |
|  | |
| **Are you undertaking any course of study at present? (if so, please give details)** | |
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| **Do you have membership of any professional bodies? (if so, please give details, including any offices held)** | |
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| It is the Employer's policy to verify the qualifications of all successful job applicants. | |

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| **Supporting information**  Please give any details you feel are relevant in support of your application, including why you are interested in this post. Use additional sheets if necessary. |

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| **Other details** | | |
| What is the notice required in your present post? | | |
|  | | |
| Is your present post your sole regular employment? | Yes | No |
| Are there any restrictions on your right to work in the UK? | Yes | No |
| If yes, please state restrictions and the expiry date of any permissions. | | |
|  | | |
| Do you have a full driving licence? | Yes | No |
| Do you have any current endorsements? | Yes | No |
| Do you have use of a car? | Yes | No |
| Where did you see the advertisement for the post? | | |
|  | | |

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| **Disabilities** | | |
| **Do you require any special arrangements to be made for your [interview/assessment test] on account of a disability?** | Yes | No |
| If "yes", please give brief details of the effects of your disability on your day-to-day activities, and any other information that you feel would help us to accommodate your needs during your [interview/assessment test] and thus meet our obligations under the Equality Act 2010: | | |

**References**

Please give the details of two referees, stating how long you have known them. One should be your current or most recent employer. Please note that References for shortlisted candidates will be taken up before interview unless you request otherwise.

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| **1. Name:** | **2. Name:** |
|  |  |
| **Address:** | **Address:** |
|  |  |
| **Telephone number:** | **Telephone number:** |
|  |  |
| **Email:** | **Email:** |
|  |  |
| **Occupation:** | **Occupation:** |
|  |  |
| **Time known:** | **Time known:** |
|  |  |
| **May references be taken up before interview?**  YES/NO | **May references be taken up before interview?**  YES/NO |

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| **Data protection**  Information from this application may be processed for purposes permitted under the General Data Protection Regulation. Individuals have, on written request, the right of access to personal data held about them.  The organisation treats personal data collected during the recruitment process in accordance with its [data protection policy](http://www.xperthr.co.uk/policies-and-documents/data-protection-policy/162690/) / [policy on processing special category personal data and criminal records data](http://www.xperthr.co.uk/policies-and-documents/policy-on-processing-special-category-personal-data-and-criminal-records-data/163520/). Information about how your data is used and the basis for processing your data is provided in the Vine Church privacy notice.  **Declaration**  I declare that the information given in this application is to the best of my knowledge complete and correct.  Employee's signature Date  …………………………… ………………………  Please Note: Any false, incomplete or misleading statements may lead to dismissal. |

**Personal details**

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| **Surname:** |  |
| **Forenames:** |  |
| **Current address:** |  |
| **Day time telephone number:** |  |
| **Evening telephone number:** |  |
| **Email:** |  |