

**CONFIDENTIAL**

Chester Diocesan Board of Finance

**APPLICATION FOR THE POST OF**

**HEAD OF COUNSELLING SERVICES**

 **Date**

**PERSONAL DETAILS**

|  |  |
| --- | --- |
| Surname of applicant (CAPITAL LETTERS): |  |
| Forenames: |  |
| Title (Mr, Mrs, Miss, Ms, etc): |  |
| Address: | Telephone No (home): |
| Telephone No (work):May we contact you at work?  |
| Post Code:Email: | National Insurance No: |

**EMPLOYMENT EXPERIENCE**

Most recent post

|  |  |
| --- | --- |
|  Name & Address of current or most recent Employer  | Post Held  |
| From: |  | To: |  |
| Salary  |
| Please state notice period and/or earliest start date |
| Tel No.  | Reason for wishing to leave or for leaving  |
| Please summarise the main duties and responsibilities. |

**PREVIOUS EXPERIENCE**

|  |  |  |  |
| --- | --- | --- | --- |
| Employer (most recent first) | Post Held and main roles | DatesFrom - To | Reason for Leaving |
|  |  |  |  |

|  |
| --- |
| **ADDITIONAL INFORMATION IN SUPPORT OF YOUR APPLICATION****Please give details of your relevant skills, experience, knowledge and achievements, demonstrating how you meet the** **requirements of this post, referring to the job description and the person specification.**  |

**EDUCATION AND TRAINING**

**a) Secondary education, further and/or higher education, giving most recent qualifications first**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| School/College/University/Other  | Qualification and subject(s) | Level | Grade | Year obtained |
|  |  |  |  |  |
| **b) Qualification(s) currently being undertaken** |
| Institution/Provider | Qualification/ Subject(s) | Level | Exam | Finish date |
| **c) Relevant training and non-qualification courses attended** |
| **d) Membership of Professional Body(ies)/ Professional Qualification(s)** (if more than one, please list all) |
| Name of Professional Body(ies) | Qualification(s) | Membership level | Registration No | Date obtained |

**REHABILITATION OF OFFENDERS ACT**

|  |
| --- |
| Under the provisions of the above Act, you do not have to disclose information on certain convictions after a set period of time, as they become ‘spent’. However, some posts are **exempt** from the above Act. If a post is indicated as being exempt, **ALL** convictionsand any cautions or bind-overs must be declared and cannot be regarded as ‘spent’. |
| Have you ever been convicted of a criminal offence? | Yes |  | No |  |  |
|  |  |  |  |  |  |
| Do you have any criminal charges or summonses pending against you? | Yes |  | No |  |  |
| **Having a criminal record will not necessarily bar you from working with us.** |

**SPECIAL REQUIREMENTS**

|  |
| --- |
|  |
| The Equality Act defines a disabled person as anyone who has or has had a physical or mental impairment which has a substantial and long term effect on their ability to carry out normal day to day activities. Taking this definition into consideration, do you consider you have a disability? | Yes |  | No |  |  |
|  |  |
|  |  |
| If YES, please describe any equipment you may need or adaptations that you consider may need to be made to accommodate your disability (ies) if you are appointed to the post. |
| If you are short listed, please describe any special arrangements which you should like to be made for your interview |

**REFEREES**

Please give the names of ***two*** persons, not related to you, who are able and willing to provide up to date information on your

qualifications, experience and skills. One should normally be your present (or most recent) employer, or if you have not been

employed, a referee related to relevant community or voluntary work or, if appropriate, your head teacher or lecturer / college tutor from your last school or college or university.

We reserve the right to contact your present / last employer if an offer is made and accepted.

 **References may be taken up prior to interview, unless you have specifically requested otherwise in the section below**

|  |  |
| --- | --- |
| Name and Title | Name and Title |
| PositionWorking relationship (if any) | PositionWorking relationship (if any) |
| AddressTel No:Email | AddressTel No:Email  |
| May we contact prior to interview?  | Yes |  | No |  |  | May we contact prior to interview?  | Yes |  | No |  |  |
|  |

**OTHER DETAILS**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Do you hold a full driving licence? | Yes |  | No |  |  | Do you have access to a car? | Yes |  | No |  |  |

|  |  |
| --- | --- |
| Please state where you first learned of this vacancy |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Are you, to your knowledge, related to any member of the Diocesan Board of Finance or any holder of senior office with the Board or Diocese? | Yes |  | No |  |  |
|  |  |  |  |
| If yes, please state the person(s) and relationship(s) |  |

**DECLARATION**

* *I understand that an offer of appointment will be subject to references satisfactory to the Diocese*
* *I understand that providing false or misleading information will disqualify me from appointment or if appointed will render me liable to dismissal without notice.*
* *I declare that the information I have given is, to the best of my knowledge, true and complete.*
* *I agree that the information may be used for registered purposes under the General Data Protection Regulations (NOTE personal information will not be passed to other organisations without your prior consent)*

To the best of my knowledge and belief the information contained in this form is accurate.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date |  |

**NOTES FOR APPLICANTS:**

Before signing this form, please check that every section has been completed.

The form should be returned by post to:

Mrs EA Geddes

Director of Human Resources

Church House

5500 Daresbury Park

Daresbury

Warrington WA4 4GE

or by email to: liz.geddes@chester.anglican.org

 to arrive not later than midnight on Sunday 7th July 2019

 Interviews: Monday 22nd July 2019

Envelopes should be marked **“Confidential”**.