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THRIVE CIC Application Form

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| This form will need to be photocopied, please type or write clearly in black ink.  Please Complete all relevant sections  **Position Applying for:**  **Where did you see this advertisement:** | | | | | |
| **Personal Details** | | | | | |
| Title: | |  | | | |
| Surname: | |  | | | |
| Forename (s): | |  | | | |
| Home Address: | |  | | | |
| Postcode: | |  | | | |
| Telephone Number: | |  | | | |
| National Insurance Number: | |  | | | |
| Do you require a work permit? | | Yes | | No | |
| Have you applied to Thrive CIC before? | | Yes | | No | |
| If yes, which post/when? | |  | | | |
| Current Rate of Pay | |  | | | |
| Notice Period | |  | | | |
| **Learning and Education**  *Please also include any learning that you are currently Undertaking (use an additional sheet if necessary)* | | | | | |
| **Organisation** | | **Course or Learning Programme** | | **Dates** | |
| **School, college and University** | | **(include subject and level of achievement)** | |  | |
| **Workplace or Professional Body** | |  | |  | |
| **Any additional Training** | |  | |  | |
| **Experience**  **Starting with your most recent, please provide a complete history of any employment, work or voluntary roles you have occupied in the past 5 years or since leaving school.**  **Please do not leave any gaps. If you were not working, please state why. *(Use an additional sheet if necessary for this question)*** | | | | | |
| **Date From – To** | **Activity/Job Title** | | **Organisation** | | **What did you do?**  **(please state the reason for leaving)** |
|  |  | |  | |  |
| **You will be assessed on the following questions for shortlisting – you may wish to use personal, professional or educational experience to help you complete them.** | | | | | |
| **What positive experiences do you have of working with young people, how will this help in this post?** | | | | | |
|  | | | | | |
| **What experience do you have of participating in a team/group where you have successfully changed something? What was your role in the team?**  ***You may wish to use the STAR method to answer this question.***  ***S – situation***  ***T – task***  ***A – action***  ***R – Result*** | | | | | |
|  | | | | | |
| **Please describe an occasion of when you have had to take responsibility. What happened, what did you learn?** | | | | | |
|  | | | | | |
| **What you have to offer?**  ***Please include any other relevant information about yourself which shows why you should be appointed to this post. You may use the job description and person specification to help you complete this question.*** | | | | | |
|  | | | | | |
| **Fitness to work** | | | | | |
| Are there any reasonable adjustments which you feel should be made to the recruitment process to assist you in your application for the job? Please detail if necessary. | | | | | |
|  | | | | | |
| Are there any adjustments which you feel should be made into the position which would enable you to carry out the job? | | | | | |
|  | | | | | |
| **References**  Please give details of two people whom we may apply to for a reference.  *Thrive CIC will not approach references until after an applicant is successful* | | | | | |
| Name of **current or most recent employer:** | | | Name of **secondary reference** (should have a professional relationship to applicant): | | |
| Address: | | | Address: | | |
| Telephone: | | | Telephone: | | |
| Email: | | | Email: | | |
| **Declaration** | | | | | |
| **I HEREBY DECLARE THAT THE ABOVE STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY INFORMATION SUBMITTED IN CONNECTION WITH EMPLOYMENT AND SUBSEQUENTLY FOUND TO BE INCORRECT OR DELIBERATELY MISLEADING MAY RENDER ME LIABLE TO DISMISSAL.** | | | | | |
| **Name:** | | | | | |
| **Date:** | | | | | |
| **Sign:** | | | | | |

***Please return your application form to thrivecic23@gmail.com***