Application form

Application for role of **Café Manager**.

*Please be aware that this senior position within a Christian charity carries an occupational requirement for a practising Christian.*

## Your details

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
| Postcode: |  |
| Phone: |  |
| Email: |  |

## Education and training

Please give details:

|  |
| --- |
|  |

## Qualifications

Please give details:

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|  |

## Employment history

### Your current or most recent employer

|  |  |
| --- | --- |
| Name of employer: |  |
| Address: |  |
| Postcode: |  |
| Job title: |  |
| Pay: |  |
| Length of time with employer: |  |
| Reason for leaving: |  |
| Duties: |  |

### Previous employers

Please tell us about other jobs you have done and about the skills you used or learned in those jobs.

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## Supporting statement

Please tell us why you applied for this job and why you think you may be the best person for the job.

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## Interview arrangements and availability

If you have a disability, please tell us if there are any reasonable adjustments, we can make to help you in your application or with our recruitment process.

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Are there any dates when you will not be available for interview?

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|  |

When can you start working for us?

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## Right to work in the UK

Do you need a work permit to work in the UK? Yes / No *(please delete as appropriate)*

## References

Please give the names and contact details of two people who we can ask to give you a reference, one of whom should be your current church minister. We may refer to them before an employment offer is made. We will not ask your current employer until we get your permission.

### Referee 1 // Current Employer/other *(please delete as appropriate)*

|  |  |
| --- | --- |
| Name: |  |
| Job Title: |  |
| Company Name: |  |
| Address: |  |
| Email address: |  |
| Phone Number: |  |

### Referee 2 // Church Minister

|  |  |
| --- | --- |
| Name: |  |
| Church Name: |  |
| Address: |  |
| Email address: |  |
| Phone Number: |  |

## Declaration

I confirm that to the best of my knowledge the information I have provided on this form is correct and I accept that providing deliberately false information could result in my dismissal.

|  |  |
| --- | --- |
| Name: |  |
| Signature: |  |
| Date: |  |