

**Lagan College**

Application Form

**REF/FA1122/**

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| Application for the post of: | | | | | |
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|  | | | | | |
| **Title** | | **Forename** | | **Surname** | |
| **Home Address** |  | | | | |
| **Telephone No.** | **Home** | | **Work** | | **Mobile** |
| **E Mail Address** |  | | | | |

**The closing date for completed applications is Wednesday 7 December at 1pm.**

**Emailed or faxed applications will not be accepted**

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| **Applicants should note the following:**   * **Every section of the Application Form should be completed.** * **Completed application must be returned by time stated on the**   **closing date.**   * **Only applications received by time and date stated will be considered.** * **Curriculum Vitae will not be accepted.** * **Emailed or faxed applications will not be accepted** * **Applicants must ensure that all the relevant criteria are addressed.** |

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| Section 2: Education and Qualifications | | | | | | | | | | | | |
| 1. Secondary Education (names of schools/colleges not required) | | | | | | | | | | | | |
| **Type of Educational Establishment** | **Date:**  **From** | | | **To** | | **Qualification Obtained (please indicate level/subject/grade/year achieved.)** | | | | | | |
|  |  | | |  | |  | | | | | | |
| 1. Further, Higher and Professional Education | | | | | | | | | | | | |
| **Type of Educational Establishment** | **Date:**  **From** | | | **To** | | **Qualification Obtained (please indicate level/subject/grade/year achieved.)** | | | | | | |
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| Section 3: Present Position | | | | | | | | | | | | |
| Name of Organisation | | |  | | | | Job Title | | |  | | |
| Date of appointment | | |  | | | | To whom accountable | | |  | | |
| Summary of main duties and responsibilities | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| Current Salary : £ | | | | | Notice required to terminate present employment: | | | | | | | |
| May we ask your current employer for a reference prior to interview? YES/NO | | | | | | | | | | | | |
| Section 4: Previous Experience | | | | | | | | | | | | |
| Name & address of employer | | Job title, main duties and responsibilities | | | | | | | Dates of employment:  From To | | | Reason for leaving |
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| Section 5: Criteria for this Appointment | | | | | | | | | | | | |
| Please read the statement of essential and desirable criteria for this appointment and use the space below to set out the evidence which in your opinion demonstrates that you meet these criteria. You must refer to all the criteria, listed on the personnel specification, in order. | | | | | | | | | | | | |
| Section 6: Other Activities and Interests | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| Section 7: References | | | | | | | | | | | | |
| Please give the names, addresses and telephone numbers of two persons to whom application may be made in confidence for references. These persons should not be relatives or friends. One of these persons should be able to write about your performance and achievement in your present position. Please note – references may be sought prior to interview. | | | | | | | | | | | | |
| **Title, Name and Address**  **Email address:**  **Occupation:** | | | | | | | | **Title, Name and Address**  **Email address:**  **Occupation:** | | | | |
| **Telephone No.** | | | | | | | | **Telephone No.** | | | | |
| Section 8: Criminal Record Check | | | | | | | | | | | | |
| Please state if you hold any convictions for criminal offences, including driving offences and provide brief details of each. | | | | | | | | | | | | |
| Section 9: Declaration by the Candidate | | | | | | | | | | | | |
| **Please sign the undernoted declaration**   * I have read and understood all the information given regarding this post and the procedure for making the appointment. * I have provided information in the application form which I believe to be honest and truthful. * I am willing, if offered the post, to agree to a criminal records check and a medical examination being carried out prior to the appointment being confirmed.   **Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | |