**Ref: ESP/DSD/0424**

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**APPLICATION FOR THE POST OF**

**Director of Strategic Development**

Please complete all relevant sections of this form.

**NAME OF APPLICANT:**

**EMAIL ADDRESS:**

This form must be received by email **no later than**

**12pm on Friday 5th May 2024** to:

**gillian@eastsidepartnership.com**

**GUIDANCE NOTES FOR COMPLETION OF APPLICATION FORMS:**

* Please refer to the Job Description and Person Specification, as candidates are only shortlisted for the next stage of the recruitment process on the basis of information contained in the application form which meets the criteria detailed in the Person Specification.
* Please ensure all questions are answered and that you fully complete the application form.
* Applications are to be submitted electronically. Applications received after the above time and date will **not** be considered. The Equal Opportunities Monitoring Form should also be completed and returned with the Application Form electronically.
* Applications will not be accepted by post.
* The Partnership accepts no responsibility for checking or notifying candidates if forms are unreadable or incomplete for technical reasons.
* Please ensure that you retain the original format of the application form at all times.
* CVs must **not** be included and **will not** be considered.
* We will acknowledge receipt of your application form by email.
* You will be contacted by email if you have been shortlisted to attend the selection process.

***EastSide Partnership is an equal opportunities employer and welcomes applications from all suitably qualified persons. All appointments will be made on merit.***

1. **Personal Details:**

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
| Contact telephone number: |  |

1. **Employment Details:**

|  |
| --- |
| **Current Employment (if applicable):** |
| Name of Employer: |  |
| Address of Employer: |  |
| Position: |  |
| Date Started: |  |
| Salary: |  |
| Notice period: |  |

|  |
| --- |
| **Previous Employment:** |
| From: | To:  | Position held: |
| Name and Address of Employer: |  |
| Reason for Leaving: |  |

|  |  |  |
| --- | --- | --- |
| From: | To:  | Position held: |
| Name and Address of Employer: |  |
| Reason for Leaving: |  |

|  |  |  |
| --- | --- | --- |
| From: | To:  | Position held: |
| Name and Address of Employer: |  |
| Reason for Leaving: |  |

|  |  |  |
| --- | --- | --- |
| From: | To:  | Position held: |
| Name and Address of Employer: |  |
| Reason for Leaving: |  |

1. **Essential Criteria**

**Please explain how you meet the essential experience and other criteria as detailed in the Person Specification**

Applicants **must** demonstrate on the application form, by providing personal and specific examples and relevant experience how they meet each of the following criteria:

1. Third level qualification or equivalent in a relevant discipline such as business management and development, project management, marketing and communication etc

|  |
| --- |
| Qualifications: |

1. Minimum of three years’ experience operating in a senior management position with some element of responsibility for business development.

|  |
| --- |
| **(Maximum 500 words- expand box as necessary)** |

1. Minimum of three years’ experience of managing projects

|  |
| --- |
| **(Maximum 500 words- expand box as necessary)** |

1. Previous experience of managing committed and passionate people and demonstrable ability to work effectively as part of a team

|  |
| --- |
| **(Maximum 500 words- expand box as necessary)** |

1. **Desirable Criteria**

**Please explain how you meet the desirable criteria as detailed in the Person Specification**

1. Previous experience of working within a third sector organisation

|  |
| --- |
| **(Maximum 500 words- expand box as necessary)** |

1. **Criminal Convictions**

Are you currently subject to any ongoing police investigations or have you ever been convicted of a criminal offence (other than a spent conviction under the terms of the Rehabilitation of Offenders (Northern Ireland) Order 1978)?

Yes No

If yes, give details:

|  |
| --- |
|  |

1. **References**

Please give the names, addresses and occupations of **two** persons not related to you, to whom references may be sent. One of your referees should be your current or previous employer and both should be able to comment on your ability to carry out the particular tasks of the role. ***Please note: references will not be contacted unless you have been offered the role.***

|  |
| --- |
| **1. Current or Previous Employer:**Name:Address (incl post code):Contact Phone Number:Email address: |
| **2. Other Employer or nominated character referee:**Name:Address (incl post code) Contact Phone Number:Email address: |

I certify that the above information is correct and understand that any false or misleading information, if proved, may result in no further action being taken on this application.

**Signed: Date:**

**Please complete the attached equality monitoring form on the next page which will be detached from your application before your application is shared with the shortlisting panel.**

**Equal Opportunities Monitoring Form ESP/DSD/0424**

**Ref No: ESP/DSD/0424 Private & Confidential**

We are an Equal Opportunity Employer. We do not discriminate on grounds of religious belief or political opinion. We practice equality of opportunity in employment and select the best person for the job.

To demonstrate our commitment to equality of opportunity in employment we need to monitor the community background of our applicants and employees, as required by the Fair Employment and Treatment (NI) Order 1998.

Regardless of whether we practice religion, most of us in Northern Ireland are seen as Catholic or Protestant. We are therefore asking you to indicate your community background by ticking the appropriate box below.

**I am a member of the Protestant community**  **[ ]**

**I am a member of the Roman Catholic community**  **[ ]**

**I am a member of neither the Protestant nor Roman**

**Catholic community**  **[ ]**

**Did you attend a primary, preparatory or secondary school in Northern Ireland?**

If yes, please list the names and addresses of all schools attended:

Name of school:

Address:

Name of school:

Address:

**Please in****dicate whether you are: Female [ ]**

 **Male**  **[ ]**

If you do not complete this questionnaire, we are encouraged to use the “residuary” method, which means that we can make a determination on the basis of personal information on file/application form.

Note: It is a criminal offence under the legislation for a person to “give false information in connection with the preparation of the monitoring return”.