**Ref: ESP/GL19/\_\_**

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**EastSide Partnership**

**Connswater Community Greenway**

APPLICATION FOR CASUAL WORK:

**Greenway Engagement Leader**

**Based in East Belfast**

**278-280 Newtownards Road, Belfast, BT4 1HE**

**NAME OF APPLICANT:**

**EMAIL ADDRESS:**

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

**3.00pm on Friday 8th March 2018** to:

**shona@eastsidepartnership.com**

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

* Please refer to the Role 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 or fax.
* 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 you application form by email.
* The next stage of the recruitment process will be an interview. EastSide Partnership will contact you by email to notify you if you have been shortlisted for an interview. Interviews will take place on Thursday 14th March. Please ensure your availability for interview on this date prior to application, as it will not be possible to arrange an alternative date.

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

1. Name:

2. Telephone Number:

3. Address:

4. National Insurance Number:

5. Over 18 (Yes/No):

5. Please state details of any Employment and Positions held (starting with the most recent):

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| Name and Address of Present Employer(if any): | Exact Date EmploymentCommenced(Month/Year): | Position held with Current Employer: |
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6. Applicants **must** demonstrate on the application form, by providing personal, specific examples, relevant experience of each of the following:

1. Experience of dealing with members of the public in a face to face environment (minimum 6 months’ experience)
2. Ability to work as part of a team to maintain excellent working relationships

(c) Skills and attributes that would assist you in the role as Greenway Leader.

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| (a) Experience of dealing with members of the public in a face to face environment.**(Maximum 500 words- expand box as necessary)** |

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| (b) Ability to work as part of a team to maintain excellent working relationships.**(Maximum 500 words- expand box as necessary)** |

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| (c) Skills and attributes that would assist you in the role as Greenway Leader.**(Maximum 500 words- expand box as necessary)** |

7. Give details of any other experience, qualifications, skills or training which you feel may have relevance to this role:

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8. Please give details of any convictions for criminal offences which are not regarded as "spent" convictions under the Rehabilitation of Offenders (NI) Order 1978. (Include nature of offence and sentence):

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9. Please give the names, addresses and occupations of **two** persons not related to you, to whom references may be sent. One of your referees may be your current or previous employer (if any)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.***

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| **1. Current or Previous Employer (if any):**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:**