

Ref: \_\_\_\_\_

Please complete all sections in black ink.  
Information will be treated as confidential.



# APPLICATION FOR EMPLOYMENT

## POST: Cafeteria Manager

Surname .....	Forename(s) .....	<b>PERSONAL DETAILS</b>
Present Address .....		
Postcode .....		
Telephone (home) .....	(work) .....	
(mobile) .....	(email) .....	

<b>SECOND LEVEL EDUCATION</b> (name of school/college not required)		
Level of Examination	Subject obtained/to be taken	Grade

<b>FURTHER, HIGHER AND PROFESSIONAL EDUCATION</b>		
University or College attended	Subjects	Qualifications obtained

**MEMBERSHIP OF PROFESSIONAL BODIES (OPTIONAL)**

Name of Professional Body	Qualification/Membership Status (please indicate if obtained by examination)	Date Obtained

**EMPLOYMENT HISTORY**

Please give details of employment in chronological reverse order starting with current position

Name and address of employer	Post held (detail if more than one in same employment)	Annual salary/ Weekly wage	Dates	
			From	To

Indicate reasons for wishing to leave current post

What notice is required to terminate your present employment? .....

If appointed, when could you commence work? .....

May we ask your present and past employers for a reference if required?    YES     NO

## SUITABILITY (ESSENTIAL CRITERIA)

Please outline below how you feel you meet the **essential criteria** listed in the Personnel Specification. *Ensure that your information fits inside the boxes provided on this form.* (You may continue on one side of an additional A4 sheet if necessary.)

ESSENTIAL CRITERIA 1–5 from Personnel Specification (Qualifications and Experience)

ESSENTIAL CRITERIA 6–10 from Personnel Specification (Knowledge and Skills)

## SUITABILITY (DESIRABLE CRITERIA)

Please outline below how you feel you meet the **desirable criteria** listed in the Personnel Specification. *Ensure that your information fits inside the boxes provided on this form.* (You may continue on one side of an additional A4 sheet if necessary.)

DESIRABLE CRITERIA 1–5 from Personnel Specification (Qualifications and Experience)

DESIRABLE CRITERIA 5–6 from Personnel Specification (Knowledge and Skills)

**CHILD PROTECTION**

Please note that this post may be a 'regulated position' as defined under POCVA (NI) Order 2003. Is there any reason as to why you would not be suitable to work with children/young people in an educational institution? YES  NO

If 'Yes' please provide reason .....

Please provide information below to explain any gaps in your employment history.

**REFERENCES**

The names of two referees should be supplied. They may be from your school, college or employment, at least one should be from your current/most recent employer. References should not be supplied by relatives. Testimonials should not be submitted.

**Referee 1**

Name .....

Organisation .....

Position .....

Address .....

.  
. . .

Telephone .....

Contact prior to interview? YES  NO

**Referee 2**

Name .....

Organisation .....

Position .....

Address .....

.  
. . .

Telephone .....

Contact prior to interview? YES  NO

**DECLARATION**

**DECLARATION** (Canvassing/Declaration/Consent/Data Protection)

I hereby certify and declare that:

- (a) I declare that I have not canvassed in any way and that the information contained in this form is true and accurate.
- (b) I understand this post is exempt from the provisions of the Rehabilitation of Offenders (NI) Order of 1978 by virtue of the Rehabilitation of Offenders (Exemptions) (NI) order of 1979 and (Exemptions Amendment) Order (Northern Ireland) 1987. In the event of my application being successful, I consent to a check being made with the Police Service for Northern Ireland to determine if there is any record of convictions, cautions or bind-overs against me.
- (c) The information on this form and equal opportunity questionnaire is required by the College for the purpose of processing your application. The information is covered by the provisions of the Data Protection Act 1998. Your signature to this form is deemed to be authorisation by you to allow the College to process and retain the information for the purpose(s) stated.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**OUR ADDRESS**

Please return all completed information to:

FAO Office Supervisor  
Hazelwood Integrated College  
70 Whitewell Road  
Newtownabbey  
Co. Antrim  
BT36 7ES

Telephone: 028 9077 4202

Email: info@hazelwood.belfast.ni.sch.uk

Fax: 028 9077 7989

Website: www.hazelwoodcollege.co.uk

**Please don't forget to download, print out and fill in the *Equal Opportunities Monitoring Form* and include it with your application.**