

***This project and post are supported by the European Union’s PEACE IV Programme, managed by the Special EU Programmes Body (SEUPB)***

***in partnership with Mid Ulster District Council***

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| CWSAN Logo_Final_72dpi |  | **JOB REF NO**  **APPLICANT REF NO** | **ERC 2019**  **\_\_\_\_\_\_\_\_\_\_\_\_** |

**APPLICATION FORM**

**IN CONFIDENCE / PLEASE COMPLETE IN BLACK INK OR TYPESCRIPT**

ONLY APPLICATIONS CONTAINING ALL THE INFORMATION WHICH HAS BEEN SOUGHT WILL BE CONSIDERED. CANVASSING WILL DISQUALIFY

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| --- | --- |
| **Support Officer**  **“Engaging Rural Communities”**  Please **do not** include CV with application form.  You may append additional typed pages to your application. | ***PLEASE RETURN COMPLETED FORMS TO:***  **C/O Network Officer**  **COSTA**  **President Grant's Homestead, 45 Dergenagh Road, Dungannon, Co. Tyrone, BT70 1TW.**  **Email:**[**info.costa@btconnect.com**](mailto:info.costa@btconnect.com)  **By 3.00 pm on Wednesday 1st May 2019 (Late applications will not be considered)** |

|  |  |  |
| --- | --- | --- |
| SURNAME | TITLE (MR MRS, MISS, MS) | FIRST OR GIVEN NAMES |
| HOME ADDRESS    POSTCODE | | DATE OF BIRTH |
| HOME TEL NO |
| ADDRESS FOR CORRESPONDENCE (IF DIFFERENT)  POSTCODE | | DAYTIME TEL NO  NATIONAL INSURANCE NO |
|
| DO YOU HOLD A CURRENT FULL DRIVING LICENCE? YES / NO | | |
| DO YOU HAVE ACCESS TO a form of transport to fulfil the duties of the job? YES / NO  A current full driving license (valid for use in NI) and access to a car on appointment.  \*This Criteria will be waived in the case of applicants whose disability prohibits driving but who have access to a form of transport approved by the Board which will permit the successful applicant to carry out duties of the post. | | |

**EDUCATION**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| EDUCATION FROM THE AGE OF TWELVE | | SUBJECTS  STUDIED | LEVEL ATTAINED | | GRADE | YEAR |
|  | |  |  | |  |  |
| **FURTHER EDUCATION** | | | | | | |
| DEGREE/DIPLOMA/CERTIFICATE | YEAR OBTAINED | | | EXAMS TO BE TAKEN | | |
|  |  | | |  | | |

**PROFESSIONAL QUALIFICATIONS**

|  |  |  |  |
| --- | --- | --- | --- |
| NAME OF PROFESSIONAL BODY | PART NO. WITH DATE  AND RESULT | FINAL WITH DATE AND RESULT | EXAMINATIONS YET TO BE TAKEN |
|  |  |  |  |

**EMPLOYMENT HISTORY**

|  |  |  |  |
| --- | --- | --- | --- |
| PRESENT POST / Most recent (JOB TITLE) | |  | |
| NAME & ADDRESS OF PRESENT EMPLOYER | | | |
| DATE APPOINTED | GRADE OF POST | PRESENT SALARY/WAGE | PERIOD OF NOTICE |
| REASON FOR LEAVING | | | |
| PRINCIPAL DUTIES OF PRESENT POST | | | |

**EXPERIENCE**

Please list your previous posts beginning with the most recent.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| EMPLOYER | GRADE / POSITION | DUTIES (BRIEFLY) | DATES OF TENURE  FROM TO | |
|  |  |  | MONTH  YEAR | MONTH  YEAR |
|  |  |

|  |
| --- |
| PLEASE STATE BELOW HOW YOU MEET THE CRITERIA:  (You may append additional typed pages to your application)  **Essential Criteria**  Applicants must have: -   * Degree or equivalent professional qualification plus a minimum of 3 years’ full-time experience in field of either community development, health, rural development or related project delivery * Demonstrate understanding of determinants and issues of both single identity and cross identity communities. * Demonstrate understanding of policies and strategies which affect identity and specifically rural and cross community work * Demonstrate understanding of community development approaches, principles and facilitation approaches in a community based setting. |
| * Demonstrate understanding of how to identify and assess community information, needs and using an outcomes based approach to development * Demonstrate understanding of grant making processes and procedures * Experience of contributing to performance measurement/ Quality Monitoring/evaluation * Knowledge and experience of computer software packages & systems to include excel, publisher, Word, Web/internet, Power point. * The post holder will be expected to participate in meetings and activities outside normal office hours of minimum 3 evenings per week and other times including Saturdays as required to meet the needs of the project. Time in lieu will be provided.     **Desirable criteria**   * Understanding of local cross sector, cross community support across Mid Ulster |
| PLEASE STATE HOW YOUR EXPERIENCE TO DATE HAS A BEARING ON YOUR PRESENT APPLICATION. (PLEASE PROVIDE ANY ADDITIONAL INFORMATION YOU CONSIDER RELEVANT) |
| PLEASE DESCRIBE ANY OTHER ACTIVITIES WHICH MAY BE OF INTEREST IN RELATION TO THIS APPLICATION (E.G. PUBLICATIONS, COURSES ATTENDED, INTERESTS, ETC). |

PLEASE NAME TWO REFEREES, AT LEAST ONE OF WHOM SHOULD HAVE KNOWLEDGE OF YOUR PRESENT WORK AND BE IN A SUPERVISORY/MANAGERIAL CAPACITY.

(RELATIVES SHOULD NOT BE NAMED AS REFEREES)

|  |  |
| --- | --- |
| NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| DESIGNATION/  OCCUPATION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | DESIGNATION/  OCCUPATION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**YOUR PRESENT EMPLOYER WILL ONLY BE CONTACTED SHOULD YOU BE CONSIDERED FOR APPOINTMENT**

**MEDICAL HISTORY**

Please give brief details and approximate dates of any periods of sickness during the past two years.

|  |  |
| --- | --- |
| REASON FOR SICKNESS | LENGTH OF ABSENCE FROM WORK |
|  |  |
| DOCTOR'S NAME | DOCTOR'S ADDRESS |

Do you have a medical condition which may affect your performance of the job? \_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DECLARATION AND SIGNATURE**

I understand and accept that the particulars given are complete and correct to the best of my knowledge. Any candidate found to have given false information or to have wilfully suppressed

any material will be liable to disqualification and if appointed, dismissal.

USUAL SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE ENSURE THAT THE MONITORING QUESTIONNAIRE IS COMPLETED**

**Please return the completed Equal Opportunities Monitoring Questionnaire in a separate envelope along with your application marked “Monitoring Form”.**

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| --- | --- | --- | --- | --- | --- |
| **CWSAN** | | **JOB REF NO** | | **ERC 2019** | |
|  | | **APPLICANT REF NO** | |  | |

**EQUAL OPPORTUNITIES MONITORING QUESTIONNAIRE**

**STRICTLY CONFIDENTIAL**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **EQUAL OPPORTUNITY POLICY** | | | | | | |
| CWSAN welcomes applications from men and women regardless of religious affiliation, political opinion, sex, disability, race or marital status.  In order to help monitor the effectiveness of the Network’s Equal Opportunity Policy and for no other reason would you please complete the questions below, the information will be detached before your application is considered and will not be seen by those selecting candidates for interview. Thank you for your co-operation. | | | | | | |
| 1 | **PERCEIVED RELIGIOUS AFFILIATION**  Most people in Northern Ireland are seen by others as belonging to either the Protestant or Catholic Community regardless of whether or not they have religious beliefs or practice a religion. The Fair Employment (NI) Act 1989 places a duty on larger employers to establish how employees and applicants are perceived. The Network as part of it’s Equal Opportunity Policy asks you to indicate the community to which you belong by ticking the appropriate box below:- | | | | | |
|  |  | Catholic |  | Protestant |  | Neither Catholic nor Protestant |
| 2 | **GENDER** | | | | | |
|  | I am | |  | Female |  | Male |
| 3 | **MARITAL STATUS** | | | | | |
|  |  | |  | Single |  | Married |
|  | | | | | | |
|  | | |  | Widowed |  | Divorced |
| 4 | **DISABILITY**  Under the Disability Discrimination (NI) Act 1995 a disabled person is defined as a person with ***"A physical or mental impairment which has a substantial or long term adverse effect on their ability to carry out normal day to day activities."***  Having read this definition, do you consider yourself to have a disability? | | | | | |
|  | | |  | Yes |  | No |
|  | | | | | | |

**EQUAL OPPORTUNITIES MONITORING QUESTIONNAIRE**

**EXPLANATORY NOTES**

Cookstown and Western Shores Area Network (CWSAN) is committed to providing equality of opportunity for all job applicants. These notes explain the purpose of the questionnaire, the information to be provided and the way that information will be used.

The questionnaire monitors your gender, marital status, family status, disability and religion.

The questionnaire has been agreed with, and has the support of the Trade Unions and the Equality Commission.

To ensure the confidentiality of the information you provide, the questionnaire will be given a unique identifying number. Only the Officer responsible for monitoring will be able to identify that number. Your name will not appear on the questionnaire nor should it be written by you anywhere on the questionnaire. You must not allow any other person to use your questionnaire. If you should accidentally lose or destroy your questionnaire you must contact the Monitoring Officer for a copy.

The information collected on this questionnaire provides us with very useful information on the profile of individuals applying to the Network for jobs. The information will be used to measure the effectiveness of the Network’s equal opportunities policy and will assist us to develop and review positive/affirmative action policies.

The monitoring information will form no part of the selection process and is confidential.

**EQUAL OPPORTUNITIES STATEMENT**

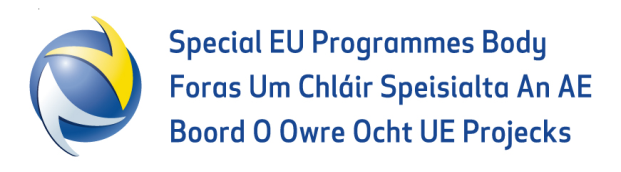
The Network is committed to an active equal opportunities policy from recruitment and selection, through training and development, appraisal and promotion to contract end.

It is the intention of the Network to actively strive to promote an environment free from discrimination, harassment and victimisation, where everyone will receive fair and equal treatment regardless of gender, colour, race or national origin, disability, age, marital status, sexual orientation or religion.

All decisions relating to employment practices will be objective, free from bias and based solely upon work criteria and individual merit.

The Network is responsive to the needs of its employees and the community at large in its duty to deliver best value by providing a consistently efficient and effective service.

It is the Network’s policy to sustain a culture which engages everyone's talents and abilities and where diversity is valued.





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