**Summer of Play Coordinator Application Form**

**Personal Details**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| First Names | | |  | Surname | |
|  | | |  |  | |
| Date of Birth | | |  | National Insurance Number | |
|  | | |  |  | |
| Address | | | | | |
|  | | | | | |
| Postcode |  |  |  | Phone Number |  |
|  | | |  |  | |
| E-mail Address |  |  |  |  |  |
|  | | | | | |

**Current or most recent employment**

|  |  |  |
| --- | --- | --- |
| Position |  | Dates Employed (From and To, Month and Year) |
|  |  |  |
| Name and Address of Employer |  |  |
|  | | |
| Main Responsibilities | | |
|  | | |

**Relevant Experience**

Details of any experience, qualifications or training relevant to this job.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Dates | | Details | | | | |
|  |  | |  |  |  |  |
|  |  | |  |  |  |  |
|  |  | |  |  |  |  |
|  |  | |  |  |  |  |
|  |  | |  |  |  |  |

**Getting Around**

(delete as appropriate)

Do you have transport of your own? Scooter / Push Bike / Car

Do you have a full driving licence? Yes / No

**Availability**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Monday |  | Early |  | Mornings |  | Afternoons |  | Evenings |
|  |  |  |  |  |  |  |  |  |
| Tuesday |  | Early |  | Mornings |  | Afternoons |  | Evenings |
|  |  |  |  |  |  |  |  |  |
| Wednesday |  | Early |  | Mornings |  | Afternoons |  | Evenings |
|  |  |  |  |  |  |  |  |  |
| Thursday |  | Early |  | Mornings |  | Afternoons |  | Evenings |
|  |  |  |  |  |  |  |  |  |
| Friday |  | Early |  | Mornings |  | Afternoons |  | Evenings |

Can you work at weekends?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Saturday |  | Always |  | Sometimes |  | Never |
|  |  |  |  |  |  |  |
| Sunday |  | Always |  | Sometimes |  | Never |

**References**

Please supply the name, address and telephone number of two referees.

(one must be your present – or most recent – employer and the other should be, where possible, a previous employer)

|  |  |  |
| --- | --- | --- |
| Name |  | Job Title |
|  |  |  |
| Address |  | Telephone |
|  |  |  |
| E-mail | | |
|  | | |
| Name |  | Job Title |
|  |  |  |
| Address |  | Telephone |
|  |  |  |
| E-mail | | |
|  | | |

Please note by entering their details you consent to your referees being approached after the interview.

**Declaration**

I declare that the information given on this form is, to the best of my knowledge, true and complete.

I understand that false statement may be sufficient for my rejection or, if employed, dismissal.

|  |  |  |
| --- | --- | --- |
| Signature |  | Date |
|  |  |  |

Please return this form, with your CV and Covering Letter, to the Clerk to the Parish Council, Applications should be marked confidential and for the attention of the Parish Clerk.

Goring on Thames Parish Council, Old Jubilee Fire Station, Red Cross Road, Goring, Reading, RG8 9HG

Clerk@GoringParishCouncil.gov.uk