|  |  |
| --- | --- |
| **Post Applied for:** |  |

# PERSONAL DETAILS

|  |  |  |  |
| --- | --- | --- | --- |
| **Surname:**  |  | **Forenames:** |  |
| **Address:** |  |
|  | **Post Code:** |  |
| **Home Tel No:** |  | **Mobile No:** |  |
| **Work telephone No:** |  | May we contact you at work?  | Yes: [ ]  No: [ ]  |
| **Email Address:** |  | **National Insurance No:** |  |

1. **EMPLOYMENT HISTORY**

**Current or most recent Position**

|  |  |  |  |
| --- | --- | --- | --- |
| **Employer:** |  | **Type of Business:** |  |
| **Address including post code:** |  | **Salary:** |  |
| **Job Title:** |  | **Start Date:** |  |
| **Notice Required (weeks):** |  | **Leave Date** **(if applicable):** |  |
| **Brief Description of Duties & Responsibilities**: |
|  |
| **Why do you wish to /did you leave this position?** |
|  |

### PREVIOUS APPOINTMENTS *(most recent first)*: Please continue on a separate sheet if necessary

|  |  |
| --- | --- |
| **Employer:** |  |
| **Address:** |  |
| **Start Date:** |  **/ /** | **Job Title:** |  | **Salary:** | **£** |
| **Leave Date** |  **/ /** | **Reason for Leaving:** |  |
| **Brief description of Duties:**  |
|  |

|  |  |
| --- | --- |
| **Employer:** |  |
| **Address:** |  |
| **Start Date:** |  **/ /** | **Job Title:** |  | **Salary:** | **£** |
| **Leave Date** |  **/ /** | **Reason for Leaving:** |  |
| **Brief description of Duties:**  |
|  |

|  |  |
| --- | --- |
| **Employer:** |  |
| **Address:** |  |
| **Start Date:** |  **/ /** | **Job Title:** |  | **Salary:** | **£** |
| **Leave Date** |  **/ /** | **Reason for Leaving:** |  |
| **Brief description of Duties:**  |
|  |

1. **EDUCATION & TRAINING**

**SECONDARY / FURTHER EDUCATION:**

|  |  |
| --- | --- |
| **School / College / University** | **Qualifications – Results with Grades\*** |
|  |  |

**RELEVANT TRAINING QUALIFICATION & MEMBERSHIPS (INCLUDING SEMICHA):**

|  |  |  |
| --- | --- | --- |
| **Type of Training (e.g. course)** | **Dates** | **Results if applicable\*** |
|  |  |  |
| **Membership of Professional Bodies/Professional Qualifications: *(with dates)\**** |
|  |

**\* *Copies of relevant certificates should be submitted with this form.***

1. **Voluntary experience and other interests**

|  |
| --- |
|  |

1. **ADDITIONAL INFORMATION IN SUPPORT OF YOUR APPLICATION**

***You may continue on only one side of A4 paper which must be attached to this application form.***

* 1. **Please mention an occasion when you handled a challenging situation well.**

**(100 words max)**

* 1. **Please mention an occasion when you handled a challenging situation badly and explain how you would respond differently today in similar circumstances.**

**(150 words max)**

* 1. **A student reveals that she is pregnant and using drugs.  How do you respond?**

**(150 words max)**

* 1. **A student you don’t know indicates an interest in going to yeshiva in the summer break.  How do you proceed?**

**(150 words max)**

* 1. **Explain your views on Israel to a mixed Jewish and non-Jewish student forum.**

**(250 words max)**

1. **DECLARATION OF APPLICANT**

|  |
| --- |
| **I certify that the answers given on this Application Form are true and complete, to the best of my knowledge.** |
| **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

***Completed applications together with a recent photo and, if you wish, a cv/resume, should be sent by email to Aliza Steinberg: aliza@mychaplaincy.co.uk.***