

APPLICATION FOR THE POST OF:

1. PERSONAL DETAILS

TITLE:
FORENAMES:
SURNAME:
ADDRESS:
POSTCODE:
DAY CONTACT NUMBER:
EVENING CONTACT NUMBER:
EMAIL:

DO YOU HAVE ANY ACCESS REQUIREMENTS? (e.g. large print, wheelchair access)

2. SUMMARY OF EXPERIENCE Please tell us about yourself and what you feel you can offer the lowdown. Any previous experience, whether paid or voluntary and any qualifications you have that may be relevant to the role.

PLEASE STATE YOUR EXPECTATIONS OF THE POST:

3. REFERENCES (one should be your current/previous employer)

<p>NAME:</p> <p>ADDRESS:</p> <p>CONTACT NUMBER:</p> <p>EMAIL ADDRESS:</p> <p>RELATIONSHIP TO YOU:</p>	<p>NAME:</p> <p>ADDRESS:</p> <p>CONTACT NUMBER:</p> <p>EMAIL ADDRESS:</p> <p>RELATIONSHIP TO YOU:</p>
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To be a Counselling Support Worker or Shift Support Worker for the lowdown you need to be 18 years aged or over.

Keeping your details confidential

We need to keep the information you give us in this form. We will not share the information with anyone else without getting your permission first.

By ticking this box you are giving us permission to store this information on file, and on computer

All volunteers will be required to be DBS (Disclosure Barring Service) Checked.

4. DECLARATION

I can confirm that to the best of my knowledge the above information is correct. I accept that providing false information could result in my dismissal.

SIGNED:

DATE:

Please return your completed application to

Lisa Braithwaite, Administrator

the lowdown

3 Kingswell Street

Northampton

NN1 1PP

or email to admin@thelowdown.info



The lowdown is a registered charity – number 801886