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| **POST APPLIED FOR -**  | **COMMUNITY ENGAGEMENT & DEVELOPMENT OFFICER** |
| **Closing Date for Applications -**  | **20th November 2024** |
| **Date by which you will be notified if you have been shortlisted for interview -**  | **26th November 2024** |
| **Date interviews will be held** | **5th December 2024** |
| **Interview Location** | **Pengwern Community Hub, Llangollen.** |
| **Completed application forms may be submitted by post to:*****South Denbighshire Community Partnership******Canolfan Ni******London Road******Corwen******Denbighshire******LL210DP*****Or via email to:** ***denise@sdcp.org*****Shortlist:****We will only contact you if you are shortlisted for an interview, and we'll do this by email or phone after the deadline.** |
| **PLEASE COMPLETE THE APPLICATION FORM FULLY**. A C.V CAN BE ATTACHED AS SUPPORTING EVIDENCEBUT NOT IN PLACE OF A COMPLETED APPLICATION FORM. |
| **Name:** |
| **Address:** |
| **Contact Telephone Number:** |
| **Email address:** |
| **First Language Welsh/English/Other.**SDCP has at its heart a commitment to valuing, celebrating and promoting Welsh language and culture. Please complete the following table with your assessment of your command of the Welsh Language.

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|  | **Fluent/First Choice when communicating -**  | **Very Confident -**  | **Confident -**  | **Basic -**  |  |  |  |
| **Spoken –**  |  |  |  |  |  |  |  |
| **Written -**  |  |  |  |  |  |  |  |
| **Reading -**  |  |  |  |  |  |  |  |

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| **Equal Opportunities**SDCP recruits’ staff and volunteers based on their skills, experience, temperament, and ability to carry the role without regard to race, nationality, gender, age, sexuality, disability, or religion. This role includes the need to set up rooms and equipment and outreach work that requires the transportation of equipment from one location to another.**HEALTH:****ARE YOU IN GOOD HEALTH?***If no, please give further information.***DO YOU HAVE ANY RECURRING HEALTH PROBLEMS THAT MAY IMPACT YOUR ABILITY TO CARRY OUT THIS ROLE AS DESCRIBED IN THE JOB DESCRIPTION & PERSON SPECIFICATION.***If no, please give further information.***DO YOU REQUIRE ANY ADAPTATIONS OR ADDITIONAL EQUIPMENT TO CARRY OUT THE ROLE AS DESCRIBED IN THE JOB DESCRIPTION.**If yes, please give further information.**DO YOU HAVE ANY COMMITMENTS WHICH MIGHT IMPACT ON YOUR AVAILABILITY TO WORK EVENINGS OR WEEKENDS.***If yes, please give further information.* |

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| **WORK HISTORY:**1. **Please include employers name and address, position held, dates and reason for leaving (reverse chronological order).**
2. **Please also explain any beak in employment history if applicable.**

**CURRENT ROLE (s) AND SALARY**

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| **From** | **To** | **Employer** | **Job Title** | **Salary** |
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**Main Duties & Responsibilities of Post:****Reason for Leaving:**

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| **From** | **To** | **Employer** | **Job Title** | **Salary** |
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**Main Duties & Responsibilities of Post:****Reason for Leaving:**

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| **From** | **To** | **Employer** | **Job Title** | **Salary** |
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**Main Duties & Responsibilities of Post:****Reason for Leaving:**

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| --- | --- | --- | --- | --- |
| **From** | **To** | **Employer** | **Job Title** | **Salary** |
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**Main Duties & Responsibilities of Post:****Reason for Leaving:** |
| **EDUCATION AND QUALIFICATIONS:**Please note, candidates invited to interview must bring all original certificates for inspection.

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| **SCHOOL** | **DATES** | **EXAM BOARD** | **SUBJECT** | **GRADE** |
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| **UNIVERSITY/COLLEGE** | **DATES** | **EXAM BOARD** | **SUBJECT** | **GRADE** |
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**MEMBERSHIP OF PROFFESSIONAL ASSOCIATIONS?**Please Provide Details.**RELEVANT TRAINING COURSES**

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| **DATE** | **DURATION** | **ORGANISATION** | **COURSE ATTENDED** |
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| **Please describe fully how you meet all the requirements of the person specification in the job pack. As this is how we shortlist it is in your best interest to give relevant examples and explain fully the skills you would bring to the post.**Knowledge (max 500 words) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Skills & Abilities (max 500 words) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Personal Qualities/Attributes (max 500 words)

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| **Please tell us any other relevant experience, information about yourself, and particular skills you have that you feel are relevant to the post.**  |
| **As this post involves working with vulnerable adults and children it is necessary for the successful candidate to have a suitable enhanced DBS clearance and Childcare Disqualification Requirement Declaration.** |
| **Do you have a current Enhanced DBS?** |
| **If yes what is the date and reference number on your certificate?** |
| **If no, would you be willing for SDCP to Carry out a DBS Check?** |
| **Please Provide the names and Contact Details of two referees. They will only be contacted if we offer you the position.** **One must be your current employer.**

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| **Referee 1** | **Referee 2** |

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| **Please include the dates for any holidays you have booked in the next 3 months****If offered the position, what notice period would you be required to provide your current employed?****If called for an interview, are there any special arrangements we would need to make to assist your attendance?**If yes, please give further information:**Declaration:**

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| Any appointment will be offered based on your application and interview. SDCP reserves the right to terminate your employment, without notice, if it was discovered that the information provided was not accurate in some material way. I confirm that, to the best of my knowledge, the information given on this form is true and correct and can be treated as part of my subsequent contract of employment. In the event of being shortlisted, I understand that, where the post is exempt from the Rehabilitation of Offenders Act 1874, I shall be asked to complete a confidential declaration regarding all convictions spent or unspent and I shall be required to undergo a DBS Clearance |  |

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| **Signed** |
| **Date** |