



## APPLICATION FORM

### Instructions to Applicants

- Please complete this form legibly and return it on or before the closing date specified in the advertisement.  
Late applications will **not be** considered.
- ONLY INFORMATION PROVIDED ON THIS APPLICATION FORM WILL BE CONSIDERED BY THE PANEL.
- Curriculum vitae will not be accepted.
- Candidates must outline clearly how their qualifications and experience meet both the ***essential and desirable requirements***.
- All information given will be treated with the strictest confidence. Continuation sheets may be added if necessary.

**POSITION APPLIED FOR: Seasonal Events and Leisure Team Member**

### 1. Personal Details

<b>Title:</b>	<b>Forename:</b>	<b>Surname:</b>
<b>Address for Correspondence:</b>		
<b>Email:</b>		<b>Postcode:</b>
<b>Telephone (Day):</b>		<b>Mobile:</b>

**Please simply tick the box which applies to you:**

<b>Do you have the right to work in the UK?</b> Note: the company will require proof of this right before an offer of employment can be confirmed – e.g. Birth certificate and/or any other appropriate document required to confirm your right to work in the UK as required by the Asylum and Immigration Act 1996	<b>Yes</b>	<b>No</b>
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## **2. Education: Qualifications Obtained/Vocational Training Course**

<b>Examination/Course (e.g. GCSE, CSE, RSA, City &amp; Guilds, NVQ etc)</b>	<b>Subject</b>	<b>Grade/Level</b>	<b>Year Obtained</b>

### **2.1 Further/Higher Level Qualifications**

<b>Qualification</b>	<b>University/College</b>	<b>Grade/Level</b>	<b>Year Obtained</b>

### **2.2 MEMBERSHIP OF PROFESSIONAL ORGANISATIONS**

<b>Date Joined</b>	<b>Institute/Organisation</b>	<b>Grade Of Membership (Where appropriate)</b>

### 3. Employment Record

(please list chronologically starting with current or most recent employer. Continue on a separate sheet if necessary).

<b>From</b> Month Year	<b>To</b> Month Year	<b>Employers Name</b> Location & Nature of Business	<b>Position Held &amp; Salary</b>	<b>Brief Description of Post</b>	<b>Reason for Leaving</b>

#### 4. TRAINING

Details of training courses attended and awards achieved, including dates, if appropriate:

#### 5. ATTENDANCE RECORD

Please details number of days and occasions of absence in the last 12 months

#### 6. DISABILITY DISCRIMINATION ACT 1995

If you require any special arrangements to be made to assist you if called for interview, please let us know in advance of the interview.

## **7. Information in support of your application**

### **Skills, abilities and experience**

- Please use this section to demonstrate why you think you would be suitable for the post by reference to the job description and person specification (and by giving examples where possible).
- Please include all relevant information, whether obtained through formal employment or voluntary/leisure activities. Attach and label any additional sheets used.

***See guidance sheet for further information***

## **8. References**

Please give the names and addresses of two persons for reference unrelated to you. One must be your current /last employer, the other preferably a past employer. Both must be able to comment on your ability to carry out the duties of the post for which you have applied.

**If you do not wish referees to be contacted prior to interview please enter X in the relevant box below.**

1.	Name:			
Company/Organisation:				
Position in Company:				
Address:				
Postcode:		Tel No:		
Please put an 'X' in the box if you do not wish referees to be contacted prior to interview				
				<input type="checkbox"/>

2.	Name:			
Company/Organisation:				
Position in Company:				
Address:				
Postcode:		Tel No:		
Please put an 'X' in the box if you do not wish referees to be contacted prior to interview				
				<input type="checkbox"/>

## **9. RETURN OF COMPLETED FORM AND DECLARATION**

When you have completed this form please return it to the address below before stated closing date.  
Return all sheets of the form whether you have used them or not. Late application forms will not be accepted.

**FAO Vanessa Elder, Operations Manager**  
**Blairs Holiday Parks**  
**Hilltop Holiday Park**  
**60 Loguestown Road**  
**Portrush**  
**BT56 8PD**  
Or by email to [vanessa@blairsholidayparks.com](mailto:vanessa@blairsholidayparks.com)

I certify that the information I have provided is true, complete and correct to the best of my knowledge, and I understand that any false statements or the withholding of any relevant information may provide grounds for the withdrawal of any offer of appointment or its immediate cancellation if an appointment has been accepted.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## **10. Applicant Monitoring Questionnaire**

Please complete and return in separate envelope marked **Monitoring Questionnaire**

### **MONITORING QUESTIONNAIRE: Private & Confidential**

Ref No:

We are an Equal Opportunities Employer. We do not discriminate on grounds of religious belief or political opinion. We practice equality of opportunity in employment and select the best person for the job.

To demonstrate our commitment to equality of opportunity in employment we need to monitor the community background of our applicants and employees, as required by the Fair Employment and Treatment (NI) Order 1998. You are not obliged to answer the questions on this form and you will not suffer any penalty if you choose not to do so.

Regardless of whether we practice religion, most of us in Northern Ireland are seen as either Roman Catholic or Protestant. We are therefore asking you to indicate your community background by circling the appropriate comment below.

**I am a member of the Protestant community**

**I am a member of the Roman Catholic community**

**I am a member of neither the Protestant nor Roman Catholic community**

Please circle whether you are:                      **Female**                                      **Male**

If you do not complete this questionnaire, we are encouraged to use the "residuary" method, which means that we can make a determination on the basis of personal information on file/application form.

Section 1 of the Disability Discrimination Act describes a disabled person as a person with a 'physical or mental impairment which has a substantial or long-term effect on his/her ability to carry out normal day-to-day activities'.

Using this definition, would you consider yourself to be disabled?                      **Yes**                      **No**  
(please circle as appropriate)

Note: It is a criminal offence under the legislation for a person to "give false information ... in connection with the preparation of the monitoring return".