**2019**

**PLEASE ATTACH A PASSPORT-SIZED PHOTO OF YOURSELF TO YOUR APPLICATION FORM**

BES Kaytana

**THE SUMMER SCHEME OF**

**BOREHAMWOOD & ELSTREE UNITED SYNAGOGUE**

Camp Director: Joel Sager MA, B.Ed, NPQH

**STAFF APPLICATION FORM – *VOLUNTEER***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Application For The Post Of: | **VOLUNTEER** | | | **Week wanted**  **(tick one option)**  **Week 1**  **Week 2** |
| In The Group For Children Going Into: | **Reception & Year 1** | **Years**  **2 & 3** | **Years**  **4, 5 & 6** |
| (please indicate your preference, writing 1, 2 or 3 in each box, 1 being the group you’d most like to work with)\* | | |

# 1. PERSONAL DETAILS:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Surname:**  (BLOCK LETTERS PLEASE) |  | | **Title:** |  |
| Forenames: |  | | | |
| **Address:** |  | | | |
|  | | | | |
|  | | **Post code:** | |  |
| **Home Tel No:** |  | **Mobile No:** | |  |
| **Email Address:** |  | | | |
| **Date of Birth:** |  | **Nat Insurance No**  **(if over 16):** | |  |

**2. VOLUNTARY EMPLOYMENT:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Current or most recent Voluntary Position** | | | |
| **Employer:** |  | | |
| **Address:** |  | | |
|  | | | |
|  | |  |  |
| **Type of Business:** |  | **Start Date:** |  |
| **Job Title** | | | |
|  | | | |
| **Brief Description of Duties& Responsibilities**: | | | |
|  | | | |

**3. EDUCATION & TRAINING**

**SECONDARY EDUCATION:**

|  |  |  |  |
| --- | --- | --- | --- |
| School/College | **Dates** From To | | Qualifications / Results with Grades\* |
|  |  |  |  |

**TRAINING:**

|  |  |  |
| --- | --- | --- |
| **Type of Training (e.g. course)** | Dates | Results if applicable\* |
|  |  |  |

**4. ADDITIONAL INFORMATION IN SUPPORT OF YOUR APPLICATION:**

Please give details of your relevant skills, experience, knowledge and achievements, demonstrating how you meet the requirements of this post. Please continue on a separate sheet if necessary.

|  |
| --- |
|  |

**5. HEALTH:**

|  |  |
| --- | --- |
| **Have you had or do you suffer from any serious illnesses?**  **If so, please state.** |  |
| **Have you received any medical treatment within the last year? If so, please state.** |  |

**6. DISABLED APPLICANTS:**

The Disability Discrimination Act 1995 defines a disabled person as anyone who has or who has had a physical or mental impairment, which has a substantial long term effect on their ability to carry out normal day-to-day activities.

|  |  |
| --- | --- |
| **Taking this definition into account, do you consider you have a disability?** | **Yes: No:** |
| **If yes, please describe any equipment you may need, or adaptations which may need to be made to accommodate your disability:** | |
|  | |

**7. GENERAL:**

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

|  |
| --- |
| **When completed, please return this form to:** |
| **STAFFING**  **Borehamwood Kaytana 2019**  **17 Tilehouse Close**  **Borehamwood**  **Herts**  **WD6 4AS** |