

**Application for Employment**

|  |
| --- |
| **Job Title:** Clinical Supervisor and Assessor |
| **Closing Date:**  25.2.2025 **Interview date:** 20.3.2025 |
| **Office Base:** Hastings |
| **Where did you see this post advertised?** |

|  |
| --- |
| **Full Name (Mr/Mrs/Ms/Miss):** |
| **Address:** |
| **Postcode:** |
| **Landline Tel:** |
| **Mobile:** |
| **Email address:** |

|  |  |
| --- | --- |
| Do you have the current right to work in the UK? | Yes/No |
| If ‘no’, please provide details. |  |

|  |  |
| --- | --- |
| Are you related to, friends with, on in a relationship with any current staff, volunteers or Trustees of Counselling Plus Community? | Yes/No |
| If ‘yes’, please provide details |  |

**Occupational History** Please give details of your last 4 positions. Please note, we will request two references once a conditional offer of employment has been accepted.

**Current/most recent employment**

|  |  |
| --- | --- |
| **Name and address of employer:** | **Job title and main duties:** |
| **Referee’s name and relationship (eg Manager/Supervisor):**  **Tel No:**  **Email:** |  |
| **Start date:** | **End date:** |
| **Present/final salary:** | **Reason for leaving:** |

**Previous Employment**

|  |  |
| --- | --- |
| **Name and address of previous employer:** | **Job title and main duties:** |
| **Referee’s name and relationship (eg Manager/Supervisor):**  **Tel No:**  **Email:** |  |
| **Start date:** | **End date:** |
| **Final salary:** | **Reason for leaving:** |
|  |  |
| **Name and address of previous employer:** | **Job title and main duties:** |
| **Start date:** | **End date:** |
| **Final salary:** | **Reason for leaving:** |

|  |  |
| --- | --- |
| **Name and address of previous employer:** | **Job title and main duties:** |
| **Start date:** | **End date:** |
|  | **Reason for leaving:** |

|  |
| --- |
| **Please give details of any breaks in work history:** |

**Professional and Educational Qualifications** Please give details of your education history here (most recent first)

|  |  |  |
| --- | --- | --- |
| **School/College/University attended** | **Subject and qualification level** | **Date issued** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Qualifications currently being studied for**

|  |  |  |
| --- | --- | --- |
| **School/College/University attended** | **Subject and qualification level** | **Finishing Date** |
|  |  |  |
|  |  |  |

|  |
| --- |
| Please note here, any memberships of professional bodies that you hold. |

**Personal Statement** This information will play a significant part in the shortlisting process. **Please refer specifically to the Person Specification and state how you meet the required criteria.** Please continue on a separate sheet if necessary.

|  |
| --- |
|  |

**Equal Opportunities** Counselling Plus Community strives to be an Equal Opportunities employer (within the limitations of the building)

|  |
| --- |
| Please note any area where you may need assistance to perform in this role. |

**Declaration of Convictions** All employees of Counselling Plus Community are subject to DBS checks (Disclosure and Barring Service - Previously CRB) at an enhanced level. Previous convictions/charges will not necessarily prohibit employment but must be disclosed.

|  |  |
| --- | --- |
| Have you ever been convicted of a criminal offence, received a formal caution, been bound over or received a conditional discharge? | Yes/No |
| Do you have any police investigations pending? | Yes/No |
| If you have answered ‘yes’ to either of the above questions, please give further details: |  |
| Are you willing to undergo an enhanced DBS check? | Yes/No |

**Data Protection Statement**

All of the information collected in this form is necessary and relevant to the performance of the job applied for. We will use the information provided by you on this form, by the referees you have noted, and the educational institutions with whom we may undertake to verify your qualifications with, for recruitment purposes only. The Organisation will treat all personal information with the utmost confidentiality and in line with current data protection legislation. We rely on the lawful basis of carrying out our legitimate interests to process the information provided by you in this form.

Should you be successful in your application, the information provided, and further information which will be gathered at the relevant time, will be subsequently used for the administration of your employment and in relation to any legal challenge which may be made regarding our recruitment practices.

**Declaration**

|  |
| --- |
| To my knowledge, the information I have provided is correct. I understand that if I am employed by CPC and this information is found to be inaccurate, this may affect my offer or continuation of employment.  Signed: Date: |

**Please send completed forms by email to** [**verra.papaspyrou@counsellingplus.org**](mailto:verra.papaspyrou@counsellingplus.org) **writing your name and ‘Clinical Supervisor and Assessor’ in the subject line**