

Step Ahead Project Teesside application form

Personal information;

|  |
| --- |
| Name (full name): Preferred name:Preferred Pronouns:Date of birth: |
| Address:  |
| Postcode: |
| Email: |
| Telephone: |
| Emergency contact Name:Emergency contact telephone number: Emergency Contact Address:Relationship:  |

|  |
| --- |
| EDUCATION (m*ost recent*) |
| Grade | **School Name** | **Period (Year)[YYYY]** | **Qualification Grade** |
| **From** | **To** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |
| --- |
| WORK EXPERIENCE/EMPLOYMENT (most recent first) |
| Company Name | **Date (Year)** | **Position** | **Description of work tasks** |
| **From** | **To** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |
| --- |
| **MAJOR SKILLS** |
|  |  |  |
|  |  |  |
|  |  |  |

***Give an example on why you want to work with children and young people***

***Give an example on why you want to work with individuals with special educational needs and disabilities (SEND)***

***State why you want to be a part of the Step Ahead Team.***

|  |
| --- |
| **REFERENCES** |
| **Please list below three persons not related to you who have knowledge of your work performance and/or personal qualifications within the last 5 years.** |
|  |
| **Name** | **Occupation** |
| **Company name** | **Address** |
| **Telephone** | **E-mail** | **Years acquainted** |
|  |  |  |
| **Name** | **Occupation** |
| **Company name** | **Address** |
| **Telephone** | **E-mail** | **Years acquainted** |
|  |  |  |
| **Name** | **Occupation** |
| **Company name** | **Address** |
| **Telephone** | **E-mail** | **Years acquainted** |

*Application form declaration*

*The information that has been provided is accurate to the best of my knowledge. I understand the position I am applying for is for a volunteer position, which means this position is an unpaid position. I understand the Step Ahead Project has a no alcohol or drugs rule; if I am seen under the influence of my volunteer agreement will be terminated.*

*Name:*

 *Date:*

