

# APPLICATION FORM

Position applying for please delete as appropriate, full / part -time term-time only Gymnastic Coach.

## 1. PERSONAL DETAILS

Title: \_\_\_\_\_

Surname: \_\_\_\_\_

Forename: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Daytime Tel No. \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Current Driving Licence: \_\_\_\_\_

## 2. EDUCATION AND TRAINING

Secondary Schools Attended Dates

Qualifications Gained Dates

Further Education Courses Attended Dates

Qualifications Gained Dates

Additional Qualifications (including membership to Professional Bodies) Dates

**3. EMPLOYMENT DETAILS** (Please use a separate sheet if necessary)

<b>Company for</b>	<b>Address</b>	<b>Dates</b>	<b>Job Title</b>	<b>Brief Job</b>	<b>Salary p.a.</b>	<b>Reason</b>
				<b>Description</b>		<b>Change</b>

**Period of Notice:** \_\_\_\_\_ Weeks

Work related Courses (including apprenticeships)

<b>Course</b>	<b>Qualification/Certificate Gained</b>	<b>Dates</b>
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**4. ADDITIONAL INFORMATION**

Please list below any skills or interests you may wish to bring to our attention, you should also indicate your reasons for applying for this post (please continue on a separate sheet if necessary)

**ADDITIONAL INFORMATION** (continued..)

**5. PLEASE DETAIL ANY SERIOUS ILLNESS OR OPERATIONS AND DETAIL ANY PERIODS OF SICKNESS OR ABSENCE DURING THE LAST TWO YEARS**

**6. REFERENCES**

Please give the name and address of two business referees one should not be approached without your permission

<b>Name/ Status</b>	<b>Address/ Phone Number</b>	<b>Occupation</b>
1.		
2.		

**7. DECLARATION**

The information provided is correct to the best of my knowledge and belief

**SIGNED:** \_\_\_\_\_  
**DATE:** \_\_\_\_\_