ST JOHN'S CENTRE Old Trafford

APPLICATION FOR EMPLOYMENT

Application for the appointment of:

CONFIDENTIAL

Deputy Manager (Operations) (21hrs)

This form should be typed or hand written in dark ink for photocopying purposes. You may also reproduce this form on a computer or word processor but must ensure it is reproduced accurately and the wording is correct. It is not sufficient to write "Please see CV", CV's will not be considered.

Please note, the closing date for return of this application is:		12 noon 16 th May 2025		
Surname	Other name	es (in full)	Title (Mr, Ms, Miss etc)	
Address:		extra	n have a disability and may need arrangements to be made for your dance at interview please indicate YES/ NO	
Postcode: Email:		_	·	
Telephone: Day	Even	ing		

Education and Training				
From	То	Institution		

Present Emplo	yment
Position held:	
Name and Address of present employer:	Date appointed
	Notice required to terminate:
	Notice required to terminate.

Dleace detail		x experience Include all paid and unpaid employment,
placements,	•	sponsibilities. Please account for any gaps in
Dates	Organisation / Employer	Position & Responsibilities

Information in support of your application.
Please refer to the Person Specification included in the Job Pack before completing this
section and give as full an answer as possible.
Please note it is not sufficient to write "Please see CV", <u>CV's will not be considered</u> .
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Please continue on additional sheets if necessary.

as referees Where app the left har	Referees ply the names, address email and telephone numbers of two people willing to act at the second people and the people under 18 or members of your family. It is repriate one should be your present or most recent employer. Please mark "X" in and column against any referee whom you do not wish to be approached at this reserve the right to take up all references at the stage when a candidate is interview. 1st Referee
	1 Referee
	2 nd Referee
Where did	you see this post advertised?
_	will disqualify. Candidates must disclose in this space whether or not they are ny member of the Centre Board or staff YES / NO
Date:	Signed:

Please return completed forms to:

Christine Aspinall, Centre Manager, St John's Centre, St John's Road, Old Trafford, Manchester, M16 7GX

Tel: 0161 872 7795 e-mail:christine.aspinall@stjohnscentre.org

> St John's Centre, St John's Road, Old Trafford, Manchester M16 7GX TEL 0161 872 7795

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