Community Chaplain
Application Form

Personal Details

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Title: |  |
| Address: |  |
| Postcode: |  |
| Telephone: |  |
| Mobile: |  |
| Email: |  |

About You

## Please tell us a bit about you and your life

Your Faith

## Please describe how you became a Christian and how your faith has grown since this time.

Your Passions and Goals

## Please express something about what motivates you and what you hope to achieve in the coming years.

Your Main Strengths

Your Main Weaknesses

What do you think you can bring to this role?

What do you need in order to thrive in your ministry?

## If you join our TEAM, we want to help you to be the best you can be. What support / working environment / accountability / anything do you think will be needed to help you to achieve all that you can?

## Is there anything that you think it would be helpful to discuss in the interview?

Education and Training

### Further Education

|  |  |  |  |
| --- | --- | --- | --- |
| From | To | College / Course | Details |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

### Other professional and practical qualifications

|  |  |  |
| --- | --- | --- |
| From | To | Details |
|  |  |  |
|  |  |  |

### Work History

Please give a brief indication, with dates, of the nature of the work and responsibilities.

|  |  |  |  |
| --- | --- | --- | --- |
| From | To | Employer | Details |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Other Relevant Skills and Experience

Other Interests and Activities

Child Protection Declaration

You will understand the great responsibility involved in working with children, young people and vulnerable adults, and the need to ensure their safety. Lutterworth PCC is committed to caring for all. If you are successful in obtaining a post it will require an Enhanced DBS check. Refusal to do so would prevent further consideration of your application. Any information received from the DBS will be treated in the strictest confidence. We also ask you to make the declarations below:

|  |  |
| --- | --- |
| Have you ever been charged with or convicted of a criminal offence; or are you at present the subject of criminal investigations? (NB the disclosure of an offence may be no bar to your appointment.) | YES / NO |
| Has your conduct ever caused or been likely to cause harm to a child or put a child at unnecessary risk, and, to your knowledge, has it ever been alleged that your conduct has resulted in any of those things? | YES / NO |

References

Please give the names and address of two people who are prepared to provide St Mary's Lutterworth with a reference. One of these should be a leader of a local church that you have attended for at least two years; the other should be someone who has worked with you with children and young people or an academic reference.

|  |  |
| --- | --- |
| Name: |  |
| Relationship: |  |
| Address: |  |
| Postcode: |  |
| Telephone: |  |
| Email: |  |
| May we contact this reference at this stage?  | YES / NO |

|  |  |
| --- | --- |
| Name: |  |
| Relationship: |  |
| Address: |  |
| Postcode: |  |
| Telephone: |  |
| Email: |  |
| May we contact this reference at this stage?  | YES / NO |

Declaration

### I confirm that all the information provided in this application is correct to the best of my knowledge.

|  |  |  |  |
| --- | --- | --- | --- |
| Signed: |  | Date: |  |

Please return to:

### personnel@lutterworthchurch.org

Or by post

### Revd Charlie AM Styles (CONFIDENTIAL)St. Mary’s Church, Church GateLutterworth, Leics, LE17 4AN