

**Application for Employment**

**Post:** Post of Hub Manager

**Reference:** HM/0819

**Notes – Please read before completing the application form**

* Applicants should submit this form only; supplementary material such as CV’s will not be considered. You should use this form to highlight relevant and appropriate qualification, experience and skills given the essential and desirable criteria outlined in the job description.
* Please return completed application form to:

Monitoring Officer, The Innovation Centre, Queen’s Road, Queen’s Island, Belfast, BT3 9DT or by soft copy to [Jamie.Smyth@wearecatalyst.org](mailto:Jamie.Smyth@wearecatalyst.org)

* Please ensure you return the monitoring form, in a separate envelope with your application form, or, if you are submitting a digital application please attach the monitoring form as a separate file and label accordingly.
* In order to be considered a signed copy (scanned and signed if submitting digitally) of your completed application must be returned no later than **10am on Tuesday, 27th August 2019.**

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| **Title:** | | | **Forename:** | | | | **Surname:** | | |
| **Address & Postcode:** | | | | | | | | | |
| **National Insurance Number:** | | | | | | | | | |
| **Do you have the right to work in the UK?**  **Yes**  **No** | | | | | **If yes, please state your eligibility to work in the UK.** | | | | |
| **Contact telephone number** | | | | |  | | | | |
| **Mobile telephone number** | | | | |  | | | | |
| **Private email address** | | | | |  | | | | |
| **Please indicate where you heard of this vacancy:** | | | | | | | | | |
| **Secondary/Further Education** | | | | | | | | | |
| **From** | **To** | | | **Type of school (e.g. Grammar)** | | **Subjects** | | | **Results** |
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| **University/Higher Education** | | | | | | | | | |
| **From** | **To** | | | **University/ College** | | **Title of Degree/ Diploma** | | | **Result** |
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| **Details of any other training courses taken** | | | | | | | | | |
| **Date** | | **Organising Body** | | | **Name of course** | | | **Result** | |
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| **Employment History – Present Employer** | | | | | | | | | |
| Name and address of present employer | | | | | | | | | |
| Date appointed | | | Job Title and Present salary/wage | | | | Period of notice | | |
| Reason for leaving | | | | | | | | | |
| Main duties of present post | | | | | | | | | |
| **Previous Post**  **(Please list your previous post beginning with the most recent)  Continue on a separate page if necessary** | | | | | | | | | |
| **Name and address of employer** | | **Job title and location** | | | **From** | | | **To** | |
| **Rate of pay** | | | | | | | | | |
| **Duties** | | | | | | | | | |
| **Reason for leaving** | | | | | | | | | |
| **Name and address of employer** | | **Job title and location** | | | **From** | | | **To** | |
| **Rate of pay** | | | | | | | | | |
| **Duties** | | | | | | | | | |
| **Reason for leaving** | | | | | | | | | |
| **Name and address of employer** | | **Job title and location** | | | **From** | | | **To** | |
| **Rate of pay** | | | | | | | | | |
| **Duties** | | | | | | | | | |
| **Reason for leaving** | | | | | | | | | |
| **Essential Criteria**  **Please demonstrate how you meet the Essential Criteria, giving as much evidence as possible. Please ensure this section of the form is completed fully and thoroughly to aid selection decision making. You may continue on a separate sheet, if needed. Please do not submit more than one additional A4 page.** | | | | | | | | | |
|  | | | | | | | | | |
| **Desirable Criteria**  **Please demonstrate how you meet the Desirable criteria. You may continue on a separate sheet, if needed. Please do not submit more than one additional A4 page.** | | | | | | | | | |
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| **Interview arrangements** | | | | | | | | | |
| Please provide details of any dates which do not suit you to attend for interview. | | | | | | | | | |
| **References**  **Please give the names and addresses of two people to whom we may apply for employment references. One should be your current or most recent employer.**  **These will not be taken up unless an offer of employment is made** | | | | | | | | | |
| Name | | | | | Name | | | | |
| Position | | | | | Position | | | | |
| Address | | | | | Address | | | | |
| Telephone number | | | | | Telephone number | | | | |
| **Declaration  Please read this carefully before signing this application** | | | | | | | | | |
| The Northern Ireland Science Park Foundation Ltd processes data in accordance with current Data Protection legislation.  I understand the details I have provided on my application documents will be processed in accordance with the Company’s recruitment procedures and may be used for equal opportunities monitoring.  In completing this form, I acknowledge that my details will be used for these purposes.  I confirm that the above information is complete and correct and that any untrue or misleading information will give the management of the Northern Ireland Science Park Foundation Ltd the right to terminate any contract of employment offered or withdraw any employment offer.  I confirm to the best of my knowledge the information supplied is correct. | | | | | | | | | |
| Signed | | | | | Date | | | | |

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Bottom of Form