Mind in Salford

1 St Philips Place

Salford

M3 6FA

admin@mindinsalford.org.uk

**JOB APPLICATION FORM**

# **PERSONAL DETAILS**

|  |  |
| --- | --- |
| WHAT POST ARE YOU APPLYING FOR?**Impact Evaluation & Compliance Manager** | SOURCE OF APPLICATION (e.g. CharityJob, Mind in Salford website etc.) |
| SURNAME | FORENAME(S) |
| ADDRESS | CONTACT PHONE NUMBER |
| Do you hold a full clean driving license? (please circle) Y / N |  |

# **EDUCATION**

Please give details of your education since the age of 15. Begin with the most recent.

|  |  |  |
| --- | --- | --- |
| Name of college/school etc | Qualifications gained | Dates  |
|   |  |  |

Please list any other relevant courses / qualifications e.g. IT courses, Health and safety. Start with the most recent.

|  |  |  |
| --- | --- | --- |
| Place and type of course | Qualifications gained | Dates |
|  |  |  |

**Employment history**

Please provide us with details of your employment record including paid and unpaid work. Start with your most recent employment.

|  |  |  |
| --- | --- | --- |
| EMPLOYER (name and address) | JOB TITLE AND DUTIES | DATES |
|  |  |  |

## Please use a separate sheet of you need more space

### ABOUT YOU please use this space to tell us why you think you are suitable for the post you are applying for e.g. personal qualities, skills, relevant experience etc.

**Please address each point of the Personal Specification and Job Description:**

### MORE ABOUT YOU

Please tell us about any voluntary organisations, committees, professional bodies etc that you are involved in.

### REFERENCES

Please provide us with details of two people (not relatives) who we could ask for a reference, after getting your permission.

NAME

OCCUPATION

ADDRESS

PHONE NUMBER

NAME

OCCUPATION

ADDRESS

PHONE NUMBER

### CANDIDATES DECLARATION

I confirm that to the best of my knowledge all the information given in my application is accurate and that I am in possession of all the certificates relating to the qualifications I claim to hold.

I understand that should any information given as part of this job application is later found to be false, or I deliberately withhold information relevant to my application, I am liable to be dismissed.

# SIGNature of applicant……………………………………………

# DATE…………………….

**Please email completed applications to** admin@mindinsalford.org.uk

**Closing date 5pm on Friday 1st August 2025**