



Counselling Service

64 Market St, Eastleigh SO50 5RD

Registered Charity No. 1058123

Tel: 07707 664702

Training/Placement Application Form

	Personal Details
Full Name	
Preferred title	
Date of birth	
Address	
Postcode	
Telephone Day	
Telephone Evening	
E-mail address	
Do you hold a current full driving licence?	
Do you have access to a car?	

Education

Dates (Month/Year)	Name of Secondary School/University	Full/Part-time	Qualifications and grades

Details of Other Courses Attended

Year	Length of Course	Course Title & Organising Body	Training Provider

Other Relevant Skills (e.g. computer skills, foreign languages)

Outside Interests/leisure activities

Health

Is there anything concerning your medical history or state of health that is relevant to this application? Yes/No. If Yes please give details.....

Do you require any special aids/assistance to enable you to participate in an interview? Yes/No. If yes please give details.....

Current or most recent employment

Present Position	Date started
Please give a brief description	
Present Employers name and address	

Previous employment (please start with the most recent first)

Dates (Month/Year) From/To	Name of Employer	Position and Duties	Reason for leaving

Voluntary work experience

Dates Month/Year From To	Organisation	Details of voluntary work	Reason for leaving

Reasons for applying

In your own handwriting, please give reasons for applying and what contributions you feel you could make to this position.

References

Please nominate two references who may be contacted to demonstrate your knowledge, skills, attributes and suitability for this placement, one of which should be your current/most recent employer or tutor. References will not be taken up until after your interview.

Name	Name
Position	Position
Organisation	Organisation
Address	Address
Telephone Number and e-mail address	Telephone Number and e-mail address
Capacity in which known	Capacity in which known
Did they know you by any other name? If yes please give details	

CONVICTIONS

Under the Rehabilitation of Offenders Act 1974 (Exemptions Order 1975) some criminal convictions/cautions are deemed spent after a period of time. Details of convictions/cautions not spent must be given below.

Date

Nature of Offence

Sentence or verdict of Court

EBS requires all volunteers to have a CRB check to establish whether or not they have a criminal background.

DECLARATION

I declare that all the information on this application form is, to the best of my knowledge and belief, true and correct. I understand that any false statement may give cause for dismissal should I be appointed.

Signature

Date