Fiat! Amen! Alleluia!
Called to the Fullness of Life and Love

Community of Our Lady of Walsingham
Administrator & Bookkeeper
Application Form

Please return this form to office@walsinghamcommunity.org or;
Sr Theresa, House of the Divine Will, Neatherd, Dereham, NR20 4AZ
Please use extra paper if you run out of space for your answers.

1. PERSONAL DETAILS

Title:

Full Name:

Address:

Email:

Contact Number/s:

Date of Birth:

2. EDUCATION AND WORK HISTORY

For this section, please provide us an up-to-date copy of your CV or fill out the following:

Do you hold a full, clean driving licence valid in the UK? YES ☐ NO ☐

SECONDARY AND HIGHER EDUCATION
INCLUDING ANY TECHNICAL OR PROFESSIONAL TRAINING UNDERTAKEN:

How did you find out about this role?

Do you have access to your own private mode of transport? YES ☐ NO ☐

Please list in reverse chronological order

YEAR FROM:	YEAR TO:	SCHOOL/COLLEGE/ UNIVERSITY	EXAMINATIONS TAKEN:	RESULTS OBTAINED:

WORK AND EMPLOYMENT HISTORY:

Please list in reverse chronological order

DATE FROM:	DATE TO:	NAME, PLACE AND EMPLOYER/COMPANY:	POSITION (S) HELD AND BRIEF DESCRIPTION OF DUTIES:	REASON FOR LEAVING:

3. SUPPORTING INFORMATION FOR YOUR APPLICATION

The Community of Our Lady of Walsingham is a new religious community within the Catholic Church. As part of this role, you will be dealing with information related to Catholicism and the running of our community, and working from our convent in Dereham. It would be helpful for us in assessing your suitability for this role for you to provide us with an account of your experience related to the above.

With reference to the attached person specification, which also outlines key responsibilities, please provide us with a summary of why you think you are a suitable candidate for this role:

4. REFEREES

Please provide us with the name, address and contact details of people from whom we may request a reference to help us assess your application.

Ideally, the first person should be your most recent employer and the second should be a priest, church minister, or someone who can provide a character reference.

REFEREE ONE:

Full name:	
Relationship to referee:	
Address:	
Email:	
Contact Number/s:	

REFEREE TWO:

Full name:	
Relationship to referee:	
Address:	
Email:	
Contact Number/s:	

5. DECLARATION

By signing the below, I acknowledge that all information given above is, to the best of my knowledge, correct and will be used to assess my suitability for the role. I understand that if any information given proves to be misleading in the future, my working relationship with COLW may be terminated. I also consent to the information I have given being kept and stored in accordance with current GDPR guidelines.

Name:	
Signed:	
Date:	