A logo with a swan and numbers

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**Application Form – Volunteer Co-ordinator, Selby Abbey: The Origin Stories**

The following information will be treated in the strictest confidence. All applicants who meet the requirements advertised will be given fair and equal consideration, regardless of race, gender, colour, creed, nationality, ethnic origin, marital status, sexual orientation, religion, age or disability.

This form must be completed fully and honestly. If not applicable, please write "Not Applicable" in the space provided.

The work you would undertake at Selby Abbey may give opportunities for contact with children and/or vulnerable adults. We follow the recommended Safeguarding Policy and Procedures of the Church of England and therefore require all applicants to complete this Application Form and a Confidential Declaration Form and to provide two independent referees who we can contact to provide information to support your application. For this role, an enhanced disclosure from the Disclosure and Barring Service (DBS) is also required. *We are required to keep up to date records to demonstrate that we take safeguarding seriously and make every effort to comply with the requirements laid down by the Archbishops Council, and General Data Protection regulations in place at the time of issue. Your information will be treated confidentially and retained only for as long as necessary.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Application Details | | | | |
| Date of application | |  | | |
| Where did you see the position advertised? | |  | | |
| Personal Details | | | | |
| Title | |  | | |
| Forename | |  | | |
| Surname | |  | | |
| Any former name(s) | |  | | |
| Date of birth | |  | | |
| Nationality | |  | | |
| National Insurance Number | |  | | |
| Home address | |  | | |
| Postcode | |  | | |
| Telephone numbers | | Home:  Mobile: | | |
| Email address | |  | | |
| How long have you lived at the above address? | |  | | |
| If <12 months, please give previous address. | |  | | |
| How long did you live there? | |  | | |
| Are you a British citizen? YES / NO (delete as applicable) | | | | |
| If “No”, please give details of your nationality and any restrictions on your time or employment in the UK. | |  | | |
| Do you have a disability? YES / NO (delete as applicable) | | | | |
| If “Yes”, please give details | |  | | |
| Education and Qualifications | | | | |
| From/To | Institution | | Award (e.g., GCSE, A level, degree, etc) | Result (e.g. grade, degree class, etc) |
|  |  | |  |  |
| Do you have any convictions that are not spent under the Rehabilitation of Offenders Act 1974? YES / NO (delete as applicable) | | | | |
| If “Yes”, please give details | |  | | |
| Health — any offer of employment will be conditional upon confirmation of your medical suitability for employment. Are you in good health? YES / NO (delete as applicable) | | | | |
| If “No”, please give details | |  | | |
| Number of days sickness absence in the last two years: | | | | |
| Are you involved in any activity which might limit your availability to work or which might limit your working hours? YES / NO (delete as applicable) | | | | |
| If “Yes”, please give details | |  | | |
| Have you ever worked at Selby Abbey before? YES / NO (delete as applicable) | | | | |
| If “Yes”, please give details | |  | | |
| Are you related to any person(s) employed by or who volunteer at Selby Abbey?  YES / NO (delete as applicable) | | | | |
| If “Yes”, please give details | |  | | |
| Do you hold a UK/EU passport? YES / NO (delete as applicable) | | | | |
| Do you require a work permit to take up employment in the UK?  YES / NO (delete as applicable) | | | | |
| If “Yes”, please give details | |  | | |
| Employment Experience starting with most recent | | | | |
| 1. Place of employment | |  | | |
| Present/final salary | |  | | |
| Position held | |  | | |
| Notice period | |  | | |
| Employment dates | |  | | |
| Nature of duties | |  | | |
| Reason for leaving | |  | | |
| 2. Place of employment | |  | | |
| Position held | |  | | |
| Employment dates | |  | | |
| Nature of duties | |  | | |
| Reason for leaving | |  | | |
| Other places of employment | | Please list below (with dates) any other places where you have been employed. | | |
| Dates | |  | | |
| Examples of previous heritage project work completed (provide information in a separate document if needed) | | | | |
|  | | | | |
| Personal interests and achievements | | | | |
|  | | | | |
| Why do you think you are suited to this vacancy? | | | | |
|  | | | | |
| When would you be available to start? | |  | | |
| REFERENCES: We are required, as part of the Church of England Safer Recruitment practice, to request two references. Please give the names of two people who would be able to provide a reference. One of these should be your current employer if applicable.  NB. Family members and anyone who worships regularly at Selby Abbey may not give references.  Reference 1 specific to your current or last employment where relevant | | | | |
| Name | |  | | |
| Position | |  | | |
| Address | |  | | |
| Postcode | |  | | |
| Telephone number | |  | | |
| Email address | |  | | |
| How does this person know you? | |  | | |
| How long has this person known you? | |  | | |
|  | | | | |
| Reference 2 | | | | |
| Name | |  | | |
| Position | |  | | |
| Address | |  | | |
| Postcode | |  | | |
| Telephone number | |  | | |
| Email address | |  | | |
| How does this person know you? | |  | | |
| How long has this person known you? | |  | | |
| Declaration  I authorise Selby Abbey to obtain references to support this application once an offer of an interview has been made and accepted. To the best of my knowledge all the information I have given is true. I understand that any false statement may disqualify me from employment or render me liable to dismissal. I give my consent to my personal information being processed in relation to my application for employment. Data Protection Act - the information given to us in this form will only be used in relation to your application for employment. By signing this declaration, you are giving us your express consent to retain and process this information under the General Data Protection Regulations in place at the date of issue. | | | | |
| Signature: | | | | |
| Date: | | | | |
| On completion, please send this form to [applications@selbyabbey.org.uk](mailto:applications@selbyabbey.org.uk)  Closing date for applications: 17:00 Sunday 7th September 2025 | | | | |
| For office use only  Application form evaluated by:  Date:  Comments: | | | | |