Estates Apprenticeship Scheme - Application Form

Personal Information

- Full Name:
- Date of Birth:
- Address:
- Postcode:
- Phone Number:
- Email Address:
- Church attending and how long for?

Getting to Know You

1. Tell us a bit about yourself:

(Who are you? What are your interests and passions? What do you like to do in your free time?)

2. Why are you interested in this Apprenticeship?

(What attracts you to estates ministry? Why do you want to be part of the CCX estate apprenticeship programme?)

3. What do you know about estates or low-income communities?

(Have you lived in or worked with these communities before, how long for, where? What was your experience like?)

4. What skills or experiences do you bring that would help you to be successful in the apprenticeship?

(This could be anything from leadership, teamwork, helping others, being part of a community, etc.)

5. What do you hope to learn, develop and achieve during the apprenticeship?

(What are your goals? What do you want to get out of this apprenticeship?)

Your Faith Journey

6. Tell us about your Christian faith:

(How did you come to faith? What does your faith mean to you? How do you live it out in your daily life?)

7. How do you see yourself living out your faith whilst engaging in this apprenticeship?

(How would you like to grow spiritually? How do you want to share your faith with others?)

Safeguarding

8. What does safeguarding mean to you? Can you tell us about your experience of safeguarding?

Support Needs

9. Do you have any specific needs or challenges that we should know about to help you succeed? (For example, do you need any help with learning, or are there any personal challenges you face? This helps us support you better.):

Disclosure

As part of helping us support you well and keep everyone safe, please let us know if there's anything that might affect your suitability for working in a church or community setting. This could include any unspent criminal convictions or anything else you think we should be aware of. Telling us won't necessarily affect your place on the scheme—we just want to make sure the right support is in place if needed.

Are you related to or in a close relationship with anyone involved with CCX (for example, a staff member, trustee, or current apprentice)? If yes, please give details:

Do you have any unspent convictions or anything else you'd like to let us know about? If yes, please give details:

References

10. Please provide the name and contact details of one person who knows you well (e.g., a pastor, mentor, or teacher):

- Name:
- Phone Number:
- Relationship to You:
- Email Address:

Final Thoughts

11. Is there anything else you would like to share with us?

(This is your chance to tell us anything else you think is important for us to know.)

Next Steps

Please submit your completed application form to fatherwilliamtaylor@hotmail.com. If you need any help filling out this form or have any questions, feel free to reach out.

Declaration

I confirm that the information provided in this application is accurate and truthful to the best of my knowledge.

- Name:.....Signature:.....Date:

General Data Protection Regulations – Consent for Job Applicants

In May 2018, the law changed about how companies record, store and use individuals personal data. Currently the Data Protection act cover how this is managed. We need to collect and hold data about you to enable us to process your job application.

Your consent is requested: We would like your consent to hold personal and special data about you in order that we can process your employment application.

Agreement to use my data: I hereby freely give my prospective employer St Thomas' Upper Clapton consent to use and process my personal data relating to my job application.

In giving my consent: I understand that I can ask to see this data to check its accuracy at any time via a subject access request (SAR). I understand that I can ask for a copy of my personal data held about me at any time, and this request is free of charge. I understand that I can

request that data that is no longer required to be held, can be removed from my file and destroyed.

Name:.....

Signature:.....

Date:.....