

Application for the position of **MISSION TEAM VOLUNTEER**

Please indicate which	centre you wish <u>t</u> o apply for
Alton Castle	
Soli Centre for	Youth Ministry
Both	
Which team are you o	nnolvina for?
2023/24	
2024/25	
Personal Details	
Title	
Surname	
Forename (s)	
Address	
Postcode	
1 0310000	
Date of Birth	
Gender	
Home Telephone	
Number	
Mobile Telephone Number	
Email address	
Erriali address	
Do you hold a full UK	
driving licence?	
_	
Name of emergency	
contact	
Address (if different	
from above)	
Mobile Telephone	
Number	



Secondary Education
Please state what schools and/or colleges you have attended and the qualifications yo
have obtained or are currently working towards

have obtained of die conernly working towards.			
Name & Address of school or college	From	То	Qualifications

Higher Education Please give details of place of study and qualifications obtained	



Employment (if applicable) If you are currently in part-time or full-time employment, please state your job title, key responsibilities and the name and address of your employer.
Personal Interests
Briefly indicate your interests and any extra-curricular activities in which you have been involved.
Character Description
Please provide a short character description of yourself.



Faith Journey Please tell us about your faith journey.
Why do you want to be a member of the Mission Team
Please explain why you want to be a member of the mission team and outline any relevant experience you have of working paid or voluntarily with children and young people and share with us your previous experience of working with others in a team.

Retreat Experience

Please tell us about any previous experience of youth retreat centres, whether as a retreatant or as a member of a retreat team.



ersonal Statement	
lease tell us about your reasons for applying to the Kenelm Trust centre for Youth Ministry xplaining both what you feel you can contribute to the volunteer team and what you	,
ope to gain from living and working here.	



Medical History

Have you consulted a doctor (other than for minor ailments) or been admitted to hospital over the last five years? YES/NO

Have you had any period of absence from education/work through illness within the last 12 months? YES/NO

Do you have any medical conditions, allergies or disabilities? YES/NO

If you have answered YES to either of the above, please provide further details on a separate sheet.

Please give details of any current medication you are taking.

Eligible to Work in the UK

All shortlisted applicants will be required to provide original material evidence of their Eligibility to Work in the UK.

Declaration	
I certify that the and belief, acc	information provided on this application is, to the best of my knowledge urate.
Signed	
Date	

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Reference no. 1 Parish Priest or School Chaplain



References

Please provide the names of three referees: one must be your Parish Priest or School Chaplain. The other, a Senior Teacher/Head of Sixth Form/University Tutor or if you are employed your most recent employer. The third will be a character reference, ideally have some knowledge of your experience relevant to team work or working with children or young people. Where possible we would like to apply for references before your interview as it helps to speed up the application and offer process. Please can you tick the box next to each referee to confirm that you authorise us to contact the referee before an offer is made.

Name		
Address		
Postcode		
Telephone		
Email		
Please can you tick made.	the box to confirm that you authorise us to contact the referee before an offer is	
Reference no. 2 Se Employers if employed	enior Teacher/Head of Sixth Form from your School/College or a University Tutor or Most Recer d	nt
Name		
Address		
Postcode		
Telephone		
Email		
Please can you tick made.	the box to confirm that you authorise us to contact the referee before an offer is	
Reference no. 3 C working with children	Character reference ideally have some knowledge of your experience relevant to team work	or
Name		
Address		
Postcode		
Telephone		
Email		
Please can you tick	the box to confirm that you authorise us to contact the referee before an offer is	

Please return this form to:

Kenelm Youth Trust Mission Team Applications, Alton Castle, Castle Hill Road, Alton, Staffordshire, ST10 4TT.

Or email Debbie.Woodward@kenelmyouthtrust.org.uk