

Please note that if you are unable to input information into this form in Microsoft Word, you can select “View” then “Edit Document” to exit Protected mode.

# FAST TRACK Application Form

This application form is designed to obtain factual information about you, your training and your work experience to date as well as to learn more about you as a person.

## ABOUT YOU

|  |  |
| --- | --- |
| Surname | Click or tap here to enter text. |
| First Name | Click or tap here to enter text. |
| Current Address | Address Line 1Address Line 2TownCountryPostcode |
| Telephone no. | Click or tap here to enter number. |
| Mobile no. | Click or tap here to enter number. |
| E-mail address | Click or tap here to enter text. |
| Date of Birth | Click or tap to enter a date. |
| Do you currently have permission to work in the UK? | Yes [ ]  No [ ]  |
| Do you currently have a full driving licence? | Yes [ ]  No [ ]  |
| Do you hold a current first aid certificate | Yes [ ]  No [ ]  |
| Do you have any unspent criminal convictions? \* | Yes [ ]  No [ ]  |
| Reasons for leaving current employment (if applicable) | Click or tap here to enter text. |
| Notice period required for current employer | Click or tap to enter a date. |

## Working For Richmond

|  |  |
| --- | --- |
| How did you hear about Richmond Holidays? | Click or tap here to enter text. |
| Why do you think you are suitable for the Richmond Fast Track Programme and what do you feel you can offer Richmond? |
| Click or tap here to enter text. |

## Health

|  |
| --- |
| Are there any areas of the role you are applying for that you would require additional support to perform due to health limitations or disabilities? |
| Click or tap here to enter text. |

## Languages Spoken

|  |
| --- |
| Please state any languages you speak and the level of fluency |
| **Language Spoken** | **Ability** |
| English | Select Fluency |
| Click here to enter language | Select Fluency |
| Click here to enter language | Select Fluency |
| Click here to enter language | Select Fluency |

## Relevant Activities

|  |  |
| --- | --- |
| **Watersports** | Ability and qualifications obtained |
| Dinghy Sailing | Ability and qualifications |
| Windsurfing | Ability and qualifications |
| Powerboat | Ability and qualifications |
| Canoeing/Kayaking | Ability and qualifications |
| Which craft do you have experience handling? | Click or tap here to enter text. |

## Interests and Hobbies

|  |
| --- |
| List the pastimes and sports which you participate in regularly and state whether you play any musical instruments, belong to any teams, clubs, associations etc. |
| Click or tap here to enter text. |

## Character

|  |
| --- |
| What do you feel are your strengths of character? |
| Click or tap here to enter text. |
| What do you feel are your weaknesses? |
| Click or tap here to enter text. |

## Christian Experience (if applicable)

|  |
| --- |
| Describe how you became a Christian and comment on what it now means to you. |
| Click or tap here to enter text. |
| Outline your experience of Christian service in the last five years, or since becoming a Christian. |
| Click or tap here to enter text. |

## References

The names of two referees are required; one should be from your current church leader, or a mature Christian who has known you recently and well, and one from a recent employer or your current school/college.

|  |  |  |
| --- | --- | --- |
|  | **Church Referee** | **Employer/School Referee** |
| Name | Click or tap here to enter text. | Click or tap here to enter text. |
|  | Address Line 1Address Line 2TownCountryPostcode | Address Line 1Address Line 2TownCountryPostcode |
| Telephone number | Click or tap here to enter text. | Click or tap here to enter text. |
| Email address | Click or tap here to enter text. | Click or tap here to enter text. |
| Position in organisation | Click or tap here to enter text. | Click or tap here to enter text. |
| Length of time known | Click or tap here to enter text. | Click or tap here to enter text. |

## Declaration

The information given on this form is to the best of my knowledge, true and complete.

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Click or tap here to enter text. | Date | Click or tap to enter a date. |
|  |
| Please tick this box to confirm that you are happy for Richmond to retain this information for future job opportunities |[ ]

Please complete this form and return to jobs@richmond-holidays.com

\* If you answered yes, please send details in a separate email addressed to HR Manager to confidential@richmond-holidays.com.
Please note, some roles will require that a DBS check is obtained before a job offer can be confirmed.