



# Application Form

## ROMANIA Team 2012

### Contact Details & Home Congregation

Full Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Post Code: \_\_\_\_\_ Email: \_\_\_\_\_

Home Tel No: \_\_\_\_\_ Mobile No: \_\_\_\_\_

Occupation: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Congregation: \_\_\_\_\_

Name of Minister: \_\_\_\_\_

### What is your current involvement in your home congregation?

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### Please say something about your faith journey and current relationship with God:

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### Enhanced Disclosure / ISA Registration

Have you been **police-checked by the Presbyterian Church in Ireland** through either **ACCESS NI** (Northern Ireland) or **An Garda Síochána** (Republic of Ireland)? YES  NO   
*If 'NO', and you are offered a place on this team, you will have to be police-checked BEFORE your place on the team is confirmed. If needed, procedures for this will be explained to you later.*

### **YOU MUST GIVE CONTACT DETAILS FOR TWO REFEREES**

One referee should be **your minister**. If your minister is a relative, please ask the Clerk of Session or an Elder in your congregation to be your first referee.

The other referee should, if possible, be a person who you have worked under or alongside in a team environment, for example in an overseas, church, work or school environment.

Please talk over your application with your referees before applying.

**Referee No. 1** Name: \_\_\_\_\_

Address: \_\_\_\_\_

Post Code: \_\_\_\_\_

Day-Time Tel No: \_\_\_\_\_ Email: \_\_\_\_\_

How do you know this person? \_\_\_\_\_

**Referee No. 2** Name: \_\_\_\_\_

Address: \_\_\_\_\_

Post Code: \_\_\_\_\_

Day-Time Tel No: \_\_\_\_\_ Email: \_\_\_\_\_

How do you know this person? \_\_\_\_\_

### **CLOSING DATE FOR RECEIPT OF APPLICATIONS** **FRIDAY, 20th JANUARY 2012**

**INTERVIEWS** are expected to take place in early February

**IN SIGNING THIS FORM**, YOU **AGREE** TO UNDERGO ANY CHECKS THAT MAY BE REQUIRED BY THE CHURCH, OR UNDER LAW, IN RESPECT OF YOUR SUITABILITY TO BE A MEMBER OF THE **ROMANIA TEAM 2012**. ANY APPOINTMENT WILL BE SUBJECT TO THOSE CHECKS BEING MADE.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

When completed, please RETURN this **Application Form** to:

#### **Youth & Children's Office**

Romania 2012

Assembly Buildings

2-10 Fisherwick Place

Belfast

BT1 6DW

t: (028) 9032 2284 e: [claire@pciyac.org](mailto:claire@pciyac.org)