

For office use only:
Disclosure No:
Date of Issue:

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Application Form for Voluntary Ministry with Face2Face Educational Trust (Please complete this form using BLACK ink. If the space is

insufficient for your answer to any question please attach further sheets.)

Please note that if you have a disability and you require this form in another format, such as large print or audio tape/cd, please contact us using the contact details above.

Section 1: Personal details							
Surname:		Usual Forename:	Title:				
Other Names:							
Home Address:		Work / Term Address:					
Postcode:		Postcode:					
Tel No:		Tel No:					
Mobile No:		Email:					
Male / Female:		Date of Birth:					
Section 2: Referees Please give the details of two people, not family members, who are over 18 years of age, have known you for at least two years and are willing to act as your referees. One should be your minister or a church leader.							
Minister / Church Leader		Other (Relationship to Applicant)					
Name:	Office use only Received Approved	Name:	Office use only Received Approved				
Address:		Address:					
Postcode:		Postcode:					
Tel No:		Tel No:					
Mobile No:		Mobile No:					
Email:		Email:					

Section 3: Interests
Why are you interested in voluntary ministry with Face2Face?
Tell us about any voluntary or employed work you have done that you think could be relevant to your application:
What gifts and skills do you believe God has given you and how have you used them?
Please give details of your interests, indicating what your level of involvement has been:
Section 4: Personal faith
Describe how and when you became a Christian, the difference your faith makes to your life and your current involvement in church:
What church do you attend? Please give contact name and phone number if different from your referee:

Section	on 5: General information						
Do you	hold a current full driving licence?			NO 🗆 YES 🗆			
Please	give details of any endorsements:						
Would	you describe your health as	Good	Fair 🗆	Poor □?			
Do you	have any special dietary requirements?			NO 🗆 YES 🗆			
If yes p	f yes please give details:						
Do you If yes p	NO YES						
Have yo	NO YES						
	ere any restrictions on you working in the UK?			NO 🗆 YES 🗆			
Please note if you are not an EU citizen we may need to see your passport. If your work with Face2Face means that you will have sole charge of children, you will be exempt from the 'Rehabilitation of Offenders Act 1974' and will be required to apply for an Enhanced Disclosure from the Criminal Records Bureau. We will send you the form to complete.							
Do you have any criminal convictions, cautions, reprimands, bind-overs or cases pending? NO \Box YES \Box							
If yes please give details on a separate sheet of paper.							
Face2Face Educational Trust works in association with Scripture Union. Scripture Union has a policy on Employing People with a Criminal Record (available on request), and such conviction does not necessarily exclude a person from employment.							
Section	on 6: Declaration						
DATA PROTECTION STATEMENT Face2Face will hold your address details on file but will not release the information to any third party. Some further details may be shared with a team leader. An address list may be shared with team and young people at a particular event, unless you ask for this not to occur.							
Do you	give your consent to this?			NO 🗆 YES 🗆			
(i)	I have read and agree to abide by the leaflet er	titled Ministry with S	cripture Union.				
(ii)	I will seek to maintain the unity of the team with which I am working, being willing to put aside my denominational / church preferences and practices where necessary.						
(iii)	I have completed all sections of the form accurately, to the best of my knowledge.						
Signed: Date: Date:							

If you have expressed an interest in a particular area of ministry, you now need to complete the final page (see over).

Section 7: Event team members					
It is the policy of F2F/Scripture Union to obtain an enh for all applicants on these teams. The form will be ser					
Where did you hear about Face2Face events					
Please list here any event(s) you are considering:					
Event Name: 1:	2:				
3:	4:				
Does the event leader know you are applying? If yes, please	give their name:				
If you have not yet decided on an event, when are you availa	ble to serve? (please be as flexible a	s possible)			
From: to:					
Outline any relevant practical skills, training or qualifications y	you have:				
What is your present job or occupation?					
If a student, please state the name of the school, college or university:					
Preferred role: Please state the age group or other role you	prefer:				
Would you be willing to serve as a Head Caterer?		NO YES			
Would you be willing to serve as part of a catering team? (no	experience necessary)	NO 🗆 YES 🗆			
Would you be willing to serve as part of a worship group?		NO 🗆 YES 🗆			
Can you play a musical instrument?		NO 🗆 YES 🗆			
If yes, please state what it is and if you will bring it:		NO 🗆 YES 🗆			
Would you be willing to serve as part of a drama group?		NO 🗆 YES 🗆			
Will you be bringing a car?		NO YES			
In case of an accident or emergency during your time on contact (NB this should be someone who is not on the ac		ls of a suitable			
Name:	Relationship to you:				
Telephone Number, Day:	Eve:				
Please pass the enclosed reference forms to your reference and indicate that you have done so.	es as named in Section 2	NO YES			

PLEASE RETURN THIS FORM TO:-

Kevin Moore, Face2Face Educational Trust, 76 Fairfields, Thetford, Norfolk, IP24 1LB

Face2Face Educational Trust working in association with Scripture Union Registered Address: 76 Fairfields, Thetford, Norfolk, IP24 1LB Registered Charity No: 1136388

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