**Application for HARC Catering Lead**

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| **Please complete all parts of this form and return by email to:** [**harc.sheffield@gmail.com**](mailto:harc.sheffield@gmail.com)  **by 12pm, 9th May 2025** |

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| **Full Name**: |
| **Address:**  **Post Code:** |
| **Mobile No**: **Landline No:** |
| **email address:** |
| **Do you currently hold a DBS certificate?** Yes ❑ No ❑ |

I confirm that the information given in this application is to the best of my knowledge, true and complete. Any false statement may be sufficient cause for rejection.

HARC will use the personal data contained in this application to complete the selection process. If you are unsuccessful, we will securely dispose of your application following the interview date.

In the absence of an e-signature, the emailing of this application to HARC constitutes your personal certification that the details are correct.

**Signature:** ………………………………………. **Date:** ………………………

**Experience section**

**Please give details of any jobs you have had that are relevant for this role**

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| --- | --- | --- | --- |
| **Job Held** | **Employer & Address** | **From:** | **To:** |
|  |  |  |  |

**Please give details of any other experience you have had that are relevant for this role (voluntary or personal)**

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**Please tell us why you would like to be considered for this role**

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## **Additional Information**

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| Do you consider yourself to have a disability for which you may need additional support to fulfil the role of trustee? Yes ❑ No ❑  *(we endeavour to make the role as accessible as possible)* |

**References** –Please give the names and addresses of someone who we may contact for a personal reference.

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| Name: |
| In what capacity do you know this person? |
| Daytime Tel. No: |
| Email address: |

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| If you are related to any member of staff employed by HARC or trustees of HARC please give further details: |

We look forward to receiving your application.

April 2025