



STAFF APPLICATION FORM 2026

All information is provided in confidence and will be stored and processed in accordance with the GDPR. Please complete this in accordance with the Job Description of the role for which you are applying.

ROLE BEING APPLIED FOR:

Personal Details	
First names:	Surname:
Address:	
Postcode:	
Mobile No:	Email Address:
Do you require a Work Permit?	
When would you be available to take up appointment?	
Do you have a full and clean driving licence and are you prepared to drive as part of your employment if required?	

Education, Qualifications & Training		
Secondary Education		
From	To	Qualifications gained and subjects studied
Further/Higher Education		
From	To	Qualifications gained and subjects studied



Relevant Professional Training

Complete Employment History (Most recent first)

From	To	Name of employer, job title, brief description of duties and responsibilities	Reason for leaving



Complete Employment History cont.			
From	To	Name of employer, job title, brief description of duties and responsibilities	Reason for leaving



CHRIST CHURCH
TUNBRIDGE WELLS

References	
1. Name and address: Telephone Number (include code): Email address: Capacity in which known to you: Can we approach this referee before interview?	2. Name and address: Telephone Number (include code): Email address: Capacity in which known to you: Can we approach this referee before interview?



CHRIST CHURCH
TUNBRIDGE WELLS

Application Details

Please state your reasons for applying and how your experience and skills meet the person specification set out in the job description.



CHRIST CHURCH
TUNBRIDGE WELLS

Strengths and Weaknesses

Given the demands of the role as you see them, where do you sense you will thrive and where do you see you will face personal challenges?

Briefly describe your Christian commitment, spiritual growth and church membership

It may be helpful to note your approach to the Bible, prayer, worship and the work of the Holy Spirit

Staff Application Form – Additional Personal Information

Role Applied For:	
Surname:	Initials:

HEALTH

Do you have any health problems that would impair your ability to carry out the post applied for?
Yes/No

If YES, please give brief details:

If you replied positively and are successful you may be required to provide a medical report from your GP.

If successful, the appointment would be subject to an enhanced DBS disclosure. Is there anything in connection with this which you would like to let us know about now? Yes/No

DISABILITY AND REASONABLE ADJUSTMENTS

In order to allow us to ensure that you have all the facilities necessary to allow you to participate fully in the interview, please let us know of any needs below

Adjustments required for interview:

If you were to be successful in the application, please let us know about any adjustments you think you would need to carry out the duties of the post:

Adjustments required in the post:



CHRIST CHURCH
TUNBRIDGE WELLS

I declare that, to the best of my knowledge, the information given on this form and on any attachments to it is true and correct. I understand and hereby agree that if I am appointed to the Church's staff it will be on the basis of this information and that a false statement may result in termination of that appointment.

Signature

Date