



## LINDISFARNE REGIONAL TRAINING PARTNERSHIP

### Application Form

**Application for the post of:** Developing Discipleship Officer working within Durham Diocese

Salaried 0.5 fte fixed term contract for 1 year

#### SECTION 1 – PERSONAL DETAILS

<b>Surname</b>	<b>First name(s)</b>
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<b>Date of birth</b>
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<b>Address</b>		<b>Post code</b>
<b>Telephone</b>	<b>Mobile</b>	
<b>Email</b>		

<b>If ordained, Reader or holding other licensed posts please list here, including diocese(s) and years.</b>
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<b>This post involves travelling around the Diocese</b>	
<b>Do you possess a current driving licence? Y/N</b>	<b>Do you have access to a car? Y/N</b>

#### SECTION 2 – EDUCATION AND TRAINING

Secondary schools		
From	To	School

**Further and Higher Education** (including any Theological study)

*Give qualification obtained*

<b>From</b>	<b>To</b>	<b>College, course etc</b>

**Other profession/practical qualifications obtained** (e.g. teaching, social work)

<b>From</b>	<b>To</b>	<b>Qualification / Experience</b>

**Theological study/courses, including informal (non-validated) courses**

<b>From</b>	<b>To</b>	<b>Description of course and qualification where relevant</b>

**Other responsibilities in the Church and wider community**

<b>From</b>	<b>To</b>	<b>Description</b>

**Recent training**

*List any relevant training/courses or other opportunities you have taken in the past 10 years that you consider would enhance your capacity to take on this role.*

**Experience relevant to this application**

*Include both paid employment and voluntary activity*

**SECTION 5 – PERSONAL STATEMENT**

**State your reasons for applying for this post**

*Continue on next page*

**SECTION 6 - REFERENCES**

**References**

*Give names, occupations and contact details of two people to whom reference can be made. The Data Protection Act of 1998 applies to all references.*

We will not contact your referees prior to interview.

**Referee**

**Occupation**

**Address**

**Telephone**

**Email**

**Referee**

**Occupation**

**Address**

**Telephone**

**Email**

**DECLARATION**

I confirm that, to the best of my knowledge, the information given in this form is correct and complete. (All information provided is confidential and is held in accordance with the Lindisfarne RTP Data Protection Policy.)

**Applicant's signature****Date**

Please return this form by email to the Principal, The Revd Canon Cathy Rowling  
[cathyrowling@lindisfarnertp.org](mailto:cathyrowling@lindisfarnertp.org)