



Trainee Youth Support Worker Application Form



Please note:

- Fields marked with an asterisk (*) are mandatory.
- This form is for those aged between 16 – 19 years who wish to take part in the co-producer training programme, which on completion makes participants eligible to work as a Trainee Youth Support Worker at Mary's Youth Club. It IS NOT an employment application form.

Applicant Details

| | | | |
|----------------|----------------------|------------|----------------------|
| First Names* | <input type="text"/> | Surname* | <input type="text"/> |
| Date of Birth* | <input type="text"/> | Age* | <input type="text"/> |
| | | Gender | <input type="text"/> |
| Home Address* | <input type="text"/> | | |
| | | Post Code* | <input type="text"/> |
| Home Tel | <input type="text"/> | Mobile Tel | <input type="text"/> |
| Email Address | <input type="text"/> | | |

General Education

| | | | |
|-------------------|----------------------|-----------------------|----------------------|
| School or College | <input type="text"/> | Qualifications gained | <input type="text"/> |
| School or College | <input type="text"/> | Qualifications gained | <input type="text"/> |
| School or College | <input type="text"/> | Qualifications gained | <input type="text"/> |

Training Courses

| | | | |
|-------|----------------------|-------------------------------|----------------------|
| Dates | <input type="text"/> | Training provider and Subject | <input type="text"/> |
| Dates | <input type="text"/> | Training provider and Subject | <input type="text"/> |
| Dates | <input type="text"/> | Training provider and Subject | <input type="text"/> |

| | | | |
|-------|--|-------------------------------|--|
| Dates | | Training provider and Subject | |
|-------|--|-------------------------------|--|

| Employment and Volunteer History | | | |
|----------------------------------|--|--|--|
| Dates | | (Most recent) Employer or organisation, your role, your duties | |
| Dates | | Employer or organisation, your role, your duties | |
| Dates | | Employer or organisation, your role, your duties | |
| Dates | | Employer or organisation, your role, your duties | |

Return this form by email to aston.wood@marys.org.uk