### **GIBRALTAR SPORTS & LEISURE AUTHORITY**

РНОТО



# **APPLICATION FORM**

GIBRALTAR SPORTS & LEISURE AUTHORITY
BAYSIDE SPORTS CENTRE
BAYSIDE ROAD
GIBRALTAR

1. POST APPLIED I	FOR:
Post Title:	ADMIN OFFICER (SPORTS DEVELOPMENT)
Name of applicant:	

- Please ensure that you answer all the questions as fully as possible.
- Fill this form in your own handwriting. Please do not cross out sections, or write 'see CV' or 'refer to CV'. Although CVs may be submitted, they will only be accepted in support of information, statements or contentions, already established in the application form.
- Write neatly in black ink, as this form will be photocopied.
- Once completed, a scanned copy of this application form and supporting documents must be submitted <u>ELECTRONICALLY</u> to the Gibraltar Sports & Leisure Authority on <u>info@gsla.gi</u> and must be received by <u>12 NOON on Friday 19<sup>th</sup> May 2023.</u> Applications received after this deadline will <u>not</u> be considered.
- Original documents as proof of academic and other qualifications must be brought to interview. (These will be checked and returned immediately).

<u>NOTE</u>: Should you have any queries relating to your application either prior to or after interview, you may write to the Chief Executive Officer.

Do not write below this line.	
I/D CARD OR PASSPORT NO.	

2. PERS	SONA	AL INI	FORMATI	NC				
Title:			Surn	ame:				
Forenar	nes:		·					
Previous	s Naı	me if A	Applicable					
Date of	Birth	:						
Age:								
Address	s:							
suitable v	way o		with the fol			and indicate	e which is t	he most
(Please t	ick)			T			<u> </u>	
Home Telephone Number:								
Work Telephone Number:								
Mobile Telephone Number:								
Email address:								

# 3. PREVIOUS POST(S) HELD / EMPLOYMENT HISTORY

Please list in order (the most recent first), the organisation(s) you have worked for, whether full or part time, including voluntary, unpaid, or self-employed work. (PLEASE USE ADDITIONAL SHEETS IF NECESSARY)

(a) Current Post held				
Dates of Employment:	From:		To:	
Job Title:				
Brief outline of Duties:				
(b) Previous Post held		ous Employment	, , , , , , , , , , , , , , , , , , , ,	
Dates of Employment:	From:		To:	
Job Title:				
Reason for leaving:				
Brief outline of Duties:				
(c) Previous Post held	/ Previo	ous Employment		
	From:		To:	
Job Title:				
Reason for leaving:				
Brief outline of Duties:				

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(d) Previous Post held	/ Previo	ous Employment		
Dates of Employment:	From:		To:	
Job Title:				
Reason for leaving:				
Brief outline of Duties:				
(e) Previous Post held	/ Previo	ous Employment		
Dates of Employment:	From:		To:	
Job Title:				
Reason for leaving:				
Brief outline of Duties:				
(f) Previous Post held	/ Previo	us Employment		
	From:		To:	
Job Title:				
Reason for leaving:				
Brief outline of Duties:				

### 4. QUALIFICATIONS

Please give details of any qualification(s) held and where obtained.

(PLEASE USE ADDITIONAL SHEETS IF NECESSARY)

School(s)	Date(s)		Qualification	Grade
333	2 3.13(3)	3 3.10 3 3 1(2)		3.0.0

### 5. FURTHER & HIGHER EDUCATION

Please give details of any further or higher education - colleges/universities attended and any qualifications obtained.

(PLEASE USE ADDITIONAL SHEETS IF NECESSARY)

College / University/ Training provider	Date(s)	Subject(s)	Qualification	Grade

c.	TDAI		DEME	OPMENT
n	I R A	ANI		CPIVICIVI

Please give details of further training taken – i.e. Management courses, IT courses, First Aid certificates etc.

(PLEASE USE ADDITIONAL SHEETS IF NECESSARY)

College / University/ Training provider	Date(s)	Subject(s)	Qualification(s) / Grade(s)

	your practical experience in leading and supporting ople with disabilities in a recreational, educational and
	TIONAL SHEETS IF NECESSARY)
Date(s)	·
Environment where experience was undertaken:	
<ol> <li>Educational</li> <li>Recreational</li> <li>Leisure</li> </ol>	
Details of role undertaken	
❖ Please at	ttach a reference letter to support the above information

7. PRACTICAL EXPERIENCE

8. PERSONAL STATEMENT -
Add any further information about yourself that you consider relevant to this application. You should describe your knowledge, experience, skills and abilities gained from your paid and/or voluntary work, studies, hobbies etc.  (PLEASE USE ADDITIONAL SHEETS IF NECESSARY)

#### 9. DATA PROTECTION ORDINANCE 2004

Under the Data Protection Ordinance 2004, the Gibraltar Sports & Leisure Authority reserves the right to collect, store and process personal data about applicants in so far as it is relevant to their application for employment. This Application Form will remain on file for as long as administratively necessary and then be destroyed. All personal information held will be processed in accordance with the Data Protection Ordinance 2004.

We will only disclose personal information contained in this form in the following circumstances: -

- If we are required to do so by any court order, or by law.
- If selected for the post, (except for information contained in Section 13), to Government Departments (for administrative purposes) and to the Gibraltar Health Authority (for the purpose of Section 11).

10. (a) EQUALITY OF OPPORTUNITY
The Gibraltar Sports & Leisure Authority is committed to a policy which ensures that all job applicants and employees receive equality of opportunity, therefore ensuring that all recruitment is solely on merit.
No applicant or employee will receive less favourable treatment on the grounds of age, disability, race, religious belief, sex or sexual orientation, or will be disadvantaged by conditions or requirements which cannot be shown to be justifiable.
10. (b) DISABLED APPLICANTS
In order to help us implement our equal opportunities policy effectively, please indicate below if you would like us to provide any particular assistance for your interview, as a result of disability.
Please specify type of assistance required, e.g. wheelchair access.

### 11. MEDICAL

I understand that if I am selected for appointment to the post for which I am applying, I will be required to undergo a medical examination and be declared fit for employment.

#### 12. STATEMENT TO BE SIGNED BY APPLICANT

I hereby give consent to the collection, storage and processing of my personal details in connection with my application and as outlined in this application form.

I confirm that to the best of my knowledge, the information given in this application form is true and correct. I understand that giving false or misleading statements or withholding information may result in withdrawal of an offer of employment, or my appointment being terminated if I have already been appointed.

NAME IN BLOCK LETTERS	SIGNED	DATE

13. DECLARATION OF CRIMINAL OFFENCES					
Have you been cautioned, court martialled, or been convicted of a criminal offence within					
the last 10 years. (Please tick below)					
\	1	No.			
YES		NO			
If you have ticked yes then you must complete the table below. Please use additional					
sheet if necessary.					
Date	Offence	Sentence	Pending Charges		
			(Give dates)		
	minal record will not necessarily				
	oorts & Leisure Authority. Thi				
	and the circumstances and bac				
you are app	e treated confidentially and only	y considered in relati	on to the post for which		
you are app	iyiig.				
Failure to disclose any information requested in this Section, may lead to the					
withdrawal of an offer of appointment, or termination of employment if you have					
already been appointed.					
Signed:					
Name:					
Name:(IN BLOCK LETTERS)					
····					
Date:					