



**High Peak Borough Council**

Committed to equal opportunities

# *Cultural Services* **Sports Development**

**CONFIDENTIAL**

## **COACH APPLICATION FORM**

Please complete in black ink or type and return to:  
Sports Development, Council Offices, Hayfield Road, Chapel-en-le-Frith, High Peak SK23 0QJ

### **1. PERSONAL DETAILS**

MR/MRS/MS MISS/DR Please delete	<b>Surname</b>	<b>First Names</b>
<b>Address</b>		
<b>Telephone numbers:</b> Day:	Evening:	E-mail:
<b>Date of birth:</b>	<b>National Insurance No:</b>	
<b>Do you have a current driving licence?</b> Yes/No	<b>Do you have any penalty points?</b> Yes/No	
<b>Do you have use of a car?</b>	Yes/No	
<b>Do you have a First Aid qualification?</b>	Yes/No	
If 'yes', please give details.		
<b>Date Awarded:</b>	<b>Expiry Date:</b>	<b>Awarding Body</b>

### **1. QUALIFICATIONS**

Please give details of any qualifications you have or any training courses you have attended.

### **2. REVELANT EXPERIENCE**

Please give details of any past or present employment or community experience including participation in societies or local groups

**4. OTHER SKILLS AND INTERESTS**

**5. AREAS OF INTEREST**

Please describe the groups you would like to work with eg. Young children, disabled people, older people and the type of work you are interested in e.g. holiday camps, after school clubs, sports clubs

**6. REFEREES** (Please give names of two referees, other than friends or relatives, who have known you for at least two years)

a. Name:

Position held by referee:

Address:

Postcode

Telephone:

E-mail:

Fax:

b. Name:

Position held by referee:

Address:

Postcode

Telephone:

E-mail:

Fax:

**6. REHABILITATION OF OFFENDERS**

Have you been convicted of a criminal offence (other than motoring or spent convictions under the terms of the Rehabilitation of Offenders Act 1974)? Yes/No

If 'yes', please specify on a separate sheet.

**7. DECLARATION**

I certify that the information on this form is true and correct to the best of my knowledge and belief.

Signed .....

Date .....

**PLEASE REMEMBER TO COMPLETE AND RETURN THE EQUAL OPPORTUNITIES MONITORING FORM**



Under the Disability Discrimination Act 1995 employers have a duty to make 'reasonable adjustments' if their employment arrangements or premises place disabled people at a substantial disadvantage compared with non-disabled people. The Council takes its obligations under the Act seriously but in any event it is committed to developing the careers of disabled people on an equal basis with everyone else. To this end, although you do not have to complete this part of the form, clearly, the more notice we are given of the possible need to make reasonable adjustments the more chance we will have of giving the matter our fullest consideration. Please answer **Yes** or **No** as appropriate and use the spaces provided to detail your needs.

**As a result of your disability:**

**Would you have any particular requirements regarding access (eg adjacent car parking; wheelchair access; mobility restricted to ground floor level)?**

Yes  No

**Are you aware of any technology or equipment which would help you do the job?**

Yes  No

**Is there any other assistance, of a non-technical nature, which would help you do the job?**

Yes  No

**Would any of the duties identified cause you significant difficulties?**

Yes  No

**Please detail below any specific requirements you may have to enable you to attend an interview.**