



Apprenticeship & Scholarship Grant – Platinum Jubilee Award

Position applied for:	Ernest Cook Trust Apprenticeship and Scholarship Grant- Platinum Jubilee Award
Where did you see this apprenticeship advertised?	Via Dry Stone Walling Association

PERSONAL DETAILS Please complete this section in BLOCK CAPITALS except where otherwise stated.	
Surname (Mr, Mrs, Miss, Ms)	Forename(s)
Address	Tel Number Home: Mobile:
Postcode	Email:
Date of Birth:	Do you require a work permit? Yes () No ()
Do you possess a full, current, driving licence ? Yes () No ()	Please give details of any current endorsements:
Can you provide your own vehicle ? Yes () No ()	

EDUCATION

Secondary School(s)	From:	To:	Certificates gained (with dates & grades)

University/College attended	Course followed (give dates) State full or part time	Qualifications gained with date(s) and grade(s)



ADDITIONAL QUALIFICATIONS

Qualification	Date taken

EMPLOYMENT HISTORY

Employer	Dates of Employment	Job Title and summary of main responsibilities	Salary at date of leaving and reason for leaving

If you were selected for this apprenticeship, how soon after an interview would you be able to start the training?

Have you ever been dismissed or discharged by an employer?
If yes, please give details



Please give details of any health issues that you believe may impact on your ability to carry out this training:

If you do have health issues, what adjustments might be made by the DSWA, if appointed, to ensure your ability to carry out your training?

REFEREES

Please give the names, addresses and telephone numbers of two referees (referees will be approached in the event of your being considered for the Training Bursary)

Name

Address

Tel No

Position Held

Name

Address

Tel No

Position Held

MEMBERSHIP OF SOCIETIES, CLUBS, ORGANISATIONS, OTHER HOBBIES AND INTERESTS

REHABILITATION OF OFFENDERS ACT

Please give details of any convictions of a criminal offence, other than a spent conviction under the Rehabilitation of Offenders Act 1974/Rehabilitation of Offenders (Northern Ireland) Order 1978.



REASONS FOR APPLICATION

You may submit this information by completing the box below or as an audio or video file. You may like to include photographs or other supporting documents with your application but we cannot return them.

Please tell us a little about yourself and give the reasons for applying for this apprenticeship together with any other information relevant to your application.

DATA PROTECTION

Access to the information contained in this form will be restricted to a limited number of authorised individuals for the purposes of interviewing and appointing a suitable candidate.

I certify that the information contained on this application form is, to the best of my knowledge, correct. I understand that the DSWA reserves the right to withdraw an offer of an apprenticeship or to terminate any offer already commenced if the information given by me is found to be inaccurate or misleading in any way.

Name

Signature

Date

Please send your completed form and any supporting documents to the DSWA Training & Education Coordinator email: training@dswa.org.uk or post to:
Dry Stone Walling Association, Lane Farm, Crooklands, Milnthorpe, LA7 7NH
Audio or video files should be sent via email to training@dswa.org.uk

If you need help with this form please contact the DSWA office: Tel 015395 67953

This Apprenticeship is supported by The Ernest Cook Trust

