

Please complete and return to:

Interserve Ireland  
14 Glencreagh Court  
Belfast  
BT6 0PA



ON TRACK APPLICATION FORM - CONFIDENTIAL

SECTION 1 - PERSONAL INFORMATION

Title: (Mr/Mrs/Ms/Other): \_\_\_\_\_

Full Name (as on passport):  
\_\_\_\_\_

Home Address:  
\_\_\_\_\_  
\_\_\_\_\_

Postcode: \_\_\_\_\_

Email (personal/work/university): \_\_\_\_\_

Tel No.: Home \_\_\_\_\_ Work \_\_\_\_\_

Mobile \_\_\_\_\_ Skype \_\_\_\_\_

Postal Address (if different from above):  
\_\_\_\_\_  
\_\_\_\_\_

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of birth: \_\_\_\_\_

Marital Status (single/married/divorced/separated/widowed/other):  
\_\_\_\_\_

Nationality(ies): \_\_\_\_\_

Blood Group: \_\_\_\_\_

Passport No.: \_\_\_\_\_ Date of Issue: \_\_\_\_/\_\_\_\_/\_\_\_\_

Place of issue: \_\_\_\_\_ Date of expiry: \_\_\_\_/\_\_\_\_/\_\_\_\_

SECTION 2 - EMPLOYMENT DETAILS

Please describe your current job/course of study:

---



---



---



---



---



---



---

Please outline any work experience that you have including your present work and any periods of unemployment, if applicable. Please include an additional page if necessary.

Dates (from & to)	Employer	Position held / main responsibilities

SECTION 3- ACADEMIC QUALIFICATIONS

(If you have a C.V. please include a copy with this application form.)

To what level have you completed your secondary education? \_\_\_\_\_

Please list in date sequence any further education with degrees or diplomas obtained, including any theological or mission training. Continue on additional sheet if necessary.

Dates	Institution	Course	Qualification obtained

Have you had any other training which would be helpful to your placement?

---



---



---

SECTION 4- CHRISTIAN BACKGROUND

Briefly describe how and when you became a Christian and how your faith has changed since then:

---

---

---

---

---

---

---

---

---

---

Name and address of your church: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Church leader's name: \_\_\_\_\_

Please give a brief outline of your involvement in your local church:

---

---

---

---

---

Please describe any previous experience you have of christian service either at home or overseas: \_\_\_\_\_

---

---

---

---

SECTION 5- SKILLS & HOBBIES

Do you play any musical instruments? (If yes please provide details)

\_\_\_\_\_

Grade(s): \_\_\_\_\_

Do you play/sing in a worship group/band? Yes  No

Do you have experience of drama/mime? Yes  No

Have a first aid qualification? Yes  No

If yes, please give details: \_\_\_\_\_

\_\_\_\_\_

Do you have experience of:

Youth Work? \_\_\_\_\_

Childrens Work? \_\_\_\_\_

Teaching? \_\_\_\_\_

Community Work? \_\_\_\_\_

Practical work/DIY? \_\_\_\_\_

What are your hobbies and interests?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What do you consider to be your main strengths and abilities?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SECTION 6 - PLACEMENT DETAILS

How did you first hear about the work of Interserve?

---

What are your main reasons for applying to do an On Track placement?

---

---

---

---

---

---

---

Which country/countries most interest you?

---

---

---

---

State any countries you have visited, indicating length of visit: \_\_\_\_\_

---

---

Have you applied to any other organisations?    Yes     No

If yes, which: \_\_\_\_\_

How long are you available to serve overseas? (Minimum = 6 weeks; Maximum = 2 years)

---

---

What are your dates of availability? From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

SECTION 7 - MEDICAL INFORMATION

Do you, or have you, suffered from any of the following: (please tick all relevant boxes)

Diabetes  Asthma  Epilepsy  High Blood Pressure  Eczema

Glandular fever  Major surgery

Other (please specify): \_\_\_\_\_

Do you have any allergies? (If so, please list) \_\_\_\_\_

Do you smoke? Yes  No  Are you vegetarian? Yes  No

Do you have any special dietary requirements (please specify)?

Are you currently receiving any medical treatment or taking prescription drugs? (If so, please specify) \_\_\_\_\_

Have you ever had any prolonged period of illness which we should be aware of? (Please give details) \_\_\_\_\_

Have you ever had problems with drug or alcohol abuse?

Do you agree to inform Interserve Ireland if your health changes at any time after completing this form?

Yes  No

*NB. All applicants will be required to obtain medical clearance from their GP before travelling overseas. It may also be necessary to meet one of our registered GPs.*

SECTION 9 - OTHER INFORMATION

Is there any other information you would like to add in support of your application? (Please use additional pages if required)

---



---



---



---



---

SECTION 10 - DECLARATION

If you answer yes to any of the following questions please give full details on a separate sheet. A criminal record will not necessarily be a bar to acceptance; all cases will be considered on an individual basis.

Have you ever been convicted of a criminal offence, placed on probation or discharged absolutely or conditionally for any criminal offence?

Yes  No

Have you had a child removed from your care or placed under local authority supervision?

Yes  No

Do you suffer from any mental illness which might affect your work with children or young people?

Yes  No

I confirm that the information given on this form is correct:

Signed: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Please return this form to the address given on the cover page with:

\* The non-refundable application fee of £15  
(cheques to be made payable to Interserve Ireland)

\* 1 passport sized photograph