

FULL-TIME FUNERAL ADMINISTRATOR

HOURS OF WORK	Office hours are Monday – Friday 9.00 am – 5.00 pm, Alternate Saturdays 10.00 am – 12 noon. You will be expected to work outside of office hours to attend meetings and community events such as evening staff meetings and meetings of community groups etc. Telephone cover and Chapel visits outside normal offices hours, as part of a rota system, will form part of the job.
PROBATIONARY PERIOD	All appointments are subject to a probationary period of six months.
SALARY	£20,000 - £22,000 per annum depending on qualifications and experience Salary is paid in arrears on the 25 th of the month by means of bank transfer.
SICK PAY	Statutory sick pay.
HOLIDAY ENTITLEMENT	28 days per calendar year including bank holidays.
SMOKING POLICY	The company operates a no smoking policy
TRAINING	Specific job training will be provided, and applicants will be expected to undertake external training leading to industry recognised qualifications

The above are guidelines only and can not be taken to constitute part of the formal contract of employment.



THE APPLICATION PROCEDURE

Please apply by completing the attached application form.

The following notes are designed to be of assistance to you in completing the form.

CVs and letters of application <u>will not</u> be accepted as a substitute for completion of the application form (although they can be included with your application if you wish). The standardising of applicant information ensures that shortlisting will fairly compare information provided by candidates.

Your application form will be the key to deciding whether you will be called to interview, therefore please take your time to complete it as fully and accurately as possible.

- Read the information pack, paying particular attention to the job description and personal specification before you start to complete the form.
- Complete all sections of the form, in full.

Remember, if you do not tell us we will not know. We are unable to make assumptions about you or your abilities.

- Print your name and address in block capitals.
- Attach any additional pages as required.
- Nominate two referees in the appropriate section. Your referees should be able to comment on your suitability for the post and should include your current or most recent employer.

Applications should be returned in an envelope clearly marked "Confidential" to:

Paul J King Paul J King Funeral Directors Causeway House 37-39 The Causeway Maldon CM9 4LJ

Applications must be received no later than 5:00pm on the 12th September 2022

If you would like your application acknowledged, please include a stamped addressed envelope with your application.

Selection for interviews will be confirmed by letter.

If you have not heard from us within <u>2 weeks</u> after the posts closing date, it is unlikely that your application has been successful on this occasion. Please do not let this deter you from applying for any future vacancies with us.

Your application will be treated in the strictest confidence.

JOB APPLICATION FORM — Branch Administrator/Funeral Arranger

Part A: Personal Information

Forename(s):

Home Address:



Date of Birth:

Please complete this form accurately, giving as many details as possible of your skills and experience relating to this job application. Shortlisting will be based on the information gathered from the form. A CV can be submitted to support your application, although all parts of the form must be completed, even if you submit a CV.

Home Telephone Number:

Mobile Number: (where possible)

Surname:

	Postcode:			Email address: (where possible)	
Do you hold a current driving lice	nce?	`	YES/NO	Do you have regular use of a vehic	cle for work? YES/NO
Part B: Education and Train	ing				
Schools / Colleges		Dates From: To:		Qualifications ob	ntained
				Qualification obtained	
Other training / courses attended	(pleas	e use an add	ditional sheet if	necessary)	
Part C: Present or last empl			400		
Present or most recent employer, Nature of business and address	,	From:	tes To:	Position held and nature of duties	Reason for wishing to leave or for having left
radiale of business and dualess					leave of for flaving left
Current / most recent salary:				Period of notice required:	

Dates	Name & Address of employer	Position held	Summary of main duties	Reason for leaving
om/to)			· 	
	an additional sheet if required			
rt E: C	omputer Skills			
ase list tl	he software packages which you are fa	amiliar with and indica	ate your level of competence	
rt F· M	lembership of Clubs, Organis	sations Groups	etc	
			Cio	
ase iist a	ny clubs or organisations of which you	rare a member		
rt G: H	lobbies and Interests			

Part H: Health and Disability	
Is there anything concerning your medical history or state of health that is relevant to your application?	YES/NO
If Yes, please give details:	
Do you consider yourself disabled within the meaning of the Disability Discrimination Act?	YES/NO
If Yes, please give details:	
Do you require any special assistance at interviews or with any aspect of the job?	YES/NO
If Yes, please give details:	
Thank you for your co-operation	
Part I: Additional Information	
Please give your reasons for applying for this post and any additional information that you feel appropria application, including achievements and skills gained which you consider relevant to the post. Continue sheets if necessary.	

Give the names and addresses of two referees, not relatives, of whom confidential enquiries may be made - one of whom must be your CURRENT employer (or if not currently employed, your last employer). If you have been with your				
employer for less than 3 years, you should also give your previous employer as a referee				
Name and Address	Position:			
	Telephone Number:			
	Email:			
	Capacity in which known to you:			
Name and Address	Position:			
	Telephone Number:			
	Email:			
	Capacity in which known to you:			
Information to be sought from your referees will (as appropriate) include the length of time they have known you, your duties and reasons for leaving, the number of days sickness absence (not reasons), details of any disciplinary action, your skills/abilities, work relationships and attitude, strengths and areas for development.				
Part K: Declaration				
I certify that the information I have given is correct and I understand that should I make an incorrect statement on this application, or should I wilfully conceal any material fact, I will, if appointed be liable for dismissal.				
Signed	Date:			
In accordance with the Data Protection Act 1998, I hereby give my consent for the information I have provided in this application to be used for the purposes outlined only on this form and as stated in the Guidance Notes for Applicants.				
Signed	Date:			

Completed application forms should be returned to:

Part J. References

Paul J King, Paul J King Funeral Directors, Causeway House, 37-39 The Causeway, Maldon CM9 4LJ

Receipt of this application form will not be acknowledged unless you include a stamped addressed envelope.

Your application will be carefully considered and shortlisted candidates will be notified of the outcome of their applications; if you have not heard within four weeks, you should assume that your application has been unsuccessful on this occasion.

Thank you for your interest in this post and for taking the time to complete this form