

Arts Administrator Application Form

Please return this form to lindsay@saltarts.org by 27 February

| First Name | | |
|----------------------|--------------|--|
| Surname | | |
| Address | | |
| City, County/Region, | | |
| Postcode | | |
| | Mobile phone | |
| Home phone number | number | |
| Email Address | | |
| Date of birth | | |

Employment: Please list your previous employment starting with the most recent, including relevant volunteer experience.

Include:

- Name of employer
- Dates of employment
- Job title
- Brief outline of
- responsibilities
- Reason for leaving

| Qualifications: P | Please list all | qualifications | including gra | des/pass marl | <s and="" dates.<="" th=""></s> |
|--------------------------|-----------------|----------------|---------------|---------------|---------------------------------|
| | | | | | |

| Professional | | | | |
|-----------------------------|-----|-----------------------------------|---|--|
| Postgraduate | | | | |
| Undergraduate | | | | |
| Further Education (college) | | | | |
| | | | | |
| | | | | |
| Funded by UK Governn | ent | Council of the ISLES OF SCILLY | GOOD GROWTH CORWALL & JULS OF SCILLY Science Proceeding France | |

Saltash Town Council

Cornwall Community Foundation Any other relevant training (in events or hospitality etc):

Please tell us in <300 words why you would like to take this role:

Please tell us in <300 words why you think you are particularly suited to this role:

Please tell us in <150 words which arts genres, events or topics you are interested in.

Do you have and first aid qualifications? Yes / No

Have you undertaken any fire safety training? Yes / No

| I confirm that I am happy to work evenings and weekends. |
|--|
| I confirm that I am able to use MS Office and shared file drives (such as OneDrive) and am familiar with commonly used social media platforms. |
| I confirm that I am available to fulfil this role from March 2025. |

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