

## Short Course Activity Staff 2005

Date Received	

Please complete this form and return it to the address below

- Personal Information -						
Family Name			First Name			
Address			Nationality			
			Date of Birth			
			Email Address			Photo
			Home Tel			
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Post Code			•			
Country			Fax			
<ul><li>Position(s) applied for -</li></ul>						
☐ Junior Course	es (Residential)		1	6+ Courses (Non-resid	ential)	
			mmodation in Oxford, plea	ase tick box		
Dates (Please tick the w	eeks in which y	you would be availa	ble for work)			
18 June 2005			25 June 2005		2 July 2005	
9 July 2005			16 July 2005		23 July 2005	
☐ 30 July 2005		L	6 August 2005		13 August 200	5
Qualification		Institution	n(s) attended	From	То	Date of Award
Please tick if you have	the following q	ualifications:				
First Aid		[	Lifeguard		Driving Licence	:
Signature					Date	

Position/Employer		Address	From	То	Reason for Leaving
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