



Saltash Town Council

Konsel An Dre Essa



SECTION A

JOB APPLICATION FORM

If you need assistance or support in completing this form, please contact us.

Section A will be separated from **Section B** before shortlisting and is not seen by anyone involved in the selection process. The shortlisting panel will make their decisions based on Section B without access to personal information. Please complete in black ink.

Job Title:

PERSONAL DETAILS

Surname (BLOCK LETTERS) (Mr / Mrs / Miss Ms / Other)		First Names	
Previous surname (if applicable)			
Address:		Contacts	
		Home Telephone No:	
		Mobile:	
E-mail:			
Postcode:		Business number if we can contact you at work:	
National Insurance No.:			

REFERENCES

Please provide the names and addresses of two referees who can comment on your suitability for this job. Do not use friends or relatives.

Name		Name	
Position		Position	
Relationship to applicant		Relationship to applicant	
Address:		Address:	
Postcode:		Tel No:	
E-mail:		E-mail:	

If you are shortlisted, are you happy for references to be requested at this stage?

Saltash Town Council values and develops a diverse workforce and treats all employees and applicants for employment fairly.

ADDITIONAL INFORMATION REQUIRED

Are you related to any Councillor or Employee of the Council? Yes No
If yes, please provide their name and position.

Have you worked for the Council or any other local authority via a Temporary Employment Agency within the last six months? If so, give details. Yes No

Have you ever been dismissed from any previous employment? Yes No
If yes, please indicate which employment and specify the reasons for your dismissal.

Have you received a redundancy payment or a pension from previous local authority employment?
Yes No
If so, please state employer's name and month / year the payment or pension was received.

Do you require any special arrangements if you are called for an interview and/or an assessment centre?
(e.g. ground floor venue, hearing loop, sign language interpreter, audio tape, etc)

PLEASE NOTE THE FOLLOWING:

Canvassing of Members of the Council directly or indirectly for any appointment under the Council will disqualify the candidate concerned for that appointment. A candidate who fails to disclose any relationship with a Member or employee of the Council will be disqualified for the appointment and if appointed, will be liable to dismissal without notice.

In accordance with General Data Protection Regulations all information given on this application form will only be used to determine an applicant's suitability for the job and will be kept only for those purposes and equal opportunities monitoring. Please refer to our Privacy Notice.

Application forms for interviewed candidates will be retained for a period of six months before being destroyed. Please select an option below:

- I agree to my application being retained for six months.
- Please do not retain my application form if I am unsuccessful.



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Office use only: REFERENCE NO.

SECTION B

Job Title:

Please take care when completing the application form as the decision to shortlist for interview will be based entirely on the information you provide. All jobs identify essential skills / abilities / competencies needed. Make sure you have all the documents you need before you complete the form. Unless you clearly demonstrate in your application how you meet all the requirements listed, you may not be shortlisted. **Please complete in black ink.**

CURRENT / MOST RECENT EMPLOYMENT

(if this will be your first job, go straight to the section entitled Educational Qualifications obtained)

Name and address of current or most recent employer	
Telephone number of employer	
Job title	
Date appointed	
Notice required	
Date left (if applicable)	
Present Salary* * please provide grade and spinal point if you have previous local authority experience	
Other payments, allowances (e.g. lease car ?)	
Reason for leaving	

Key duties and responsibilities:

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EMPLOYMENT HISTORY

Starting with your most recent appointment and working backwards, ensure all periods of time are accounted for, and any gaps in employment explained, for example unemployment, voluntary work, travel etc. You may attach an additional sheet if required. Please ensure there are no gaps in the history of your employment and other experience.

From DD/MM/Y YYY	To DD/MM/Y YYY	Name and address of Employer	Job title and brief description of duties	Salary * and reason for leaving

* Please provide Grade and spinal pay point if you have previous Local Authority experience.

EDUCATIONAL QUALIFICATIONS OBTAINED

If the job requires you to hold a particular qualification, you will be asked to produce original evidence if Shortlisted.

Relevant Qualifications (e.g. CSE, GCSE, 'O'/'A' Level, NVQ, Degree, professional or equivalent)	Subject (e.g. English, Mathematics, Business Administration, Law)	Grade (e.g. A, B, C, 1, 2, 3, Distinction, Pass)	Office use only <i>Certificates checked by:</i>

Continue on a separate sheet if necessary.

OTHER TRAINING AND DEVELOPMENT: Please list below relevant job-related training, specialist training and include details of education currently being undertaken or planned.

Title and brief description of course/qualification	Date DD/MM/YYYY

Continue on a separate sheet if necessary.

MEMBERSHIP OF PROFESSIONAL BODIES (if applicable):

Institute or Association	Level of Membership	Membership Number	How Obtained (e.g. election or qualification)	Date obtained DD/MM/YYYY

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ADDITIONAL INFORMATION

If your job requires you to travel (<i>which will be clear from your job description / role profile</i>) do you hold a full valid current driving licence?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Do you have access to transport?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Under the Working Time Regulations 1998, the Council must monitor the hours worked by its employees. Please confirm whether this will be your only employment. If not, please provide details including days and hours worked / work pattern.	Yes <input type="checkbox"/> No <input type="checkbox"/>

REASONS FOR APPLYING FOR THIS JOB (applicable to ALL applicants)

Please state the reasons why you are applying for this job. This is an important part of your application and we strongly advise you to use this opportunity to explain your suitability for the job. This information is used to draw up a shortlist and is directly related to the fair assessment of your application. If you do not provide sufficient evidence on these points, your application may be rejected.

In your application pack, you have been given a Job Description and Person Specification which identifies the essential experience and knowledge required for the job, or a Role Profile identifying the competencies required. Please provide examples and evidence of your experience and abilities which relate directly to the job being applied for.

Continue on a separate sheet if necessary.

Finally, if your application form is received electronically without your signature, and you are asked to attend for interview, you will be asked to sign the form at a later date, but in the meantime, please indicate your declaration that the information is correct by ticking the box below.

I declare that to the best of my knowledge all the information on this form and any additional material supplied is correct and that it may be used for purposes registered by the Council under the Data Protection Act 2018.

I understand that the withholding of relevant information or providing any false or misleading statement could result in the application being rejected or summary dismissal if appointed and possible referral to the police.

Yes the information and any additional material supplied in support of my application is correct.

Signature:		Date:	
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THIS BOX FOR OFFICE USE ONLY: REFERENCE NO.

POSITION:	VACANCY ID:
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Please tell us where you saw this job advertised:

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