

**Totton & Eling Town Council**

**Application Form- Private and Confidential**

*Please complete ALL sections in type or black ink and use only A4 size paper as continuation sheets as required.* ***Please return to the HR Department, Civic Centre, Totton, Hampshire. SO40 3AP***

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| --- | --- | --- | --- |
| Job Details | | | |
| Post applied for: |  | | |
| Where did you see the post advertised? | (This will help us with advertising future posts) | | |
| Personal Details | | | |
| Surname: | | Forename(s): | |
| Preferred title (eg Mr/Mrs/Miss/Ms/Dr/Other): | | | |
| Address: Post Code: | | | |
| **Telephone numbers** | | Mobile:  Work:  Home: | |
| **National Insurance No.** | |
| Personal email:  (This email address will be used to communicate with you throughout the recruitment process to send acknowledgements, invitations to interview & outcomes where appropriate) | | | |
| Immigration, Asylum and Nationality Act 2006 | | | |
| **It is a criminal offence to employ persons whose immigration status prevents them from working in the United Kingdom. Prior to appointment, you will be required to provide evidence of a passport or other documents on the approved list to satisfy us that the Asylum and Immigration Act 1996 is being complied with.** | | | |
| Do you require a work permit to work in the UK? If yes, please provide details: | | | Yes/No |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Relationship to any Council member/employee | | | | | | | | | | | | |
| To your knowledge, are you related to any member or employee of the council? If Yes, please provide details:  ***Failure to disclose such a relationship and/or canvassing will disqualify from appointment, and if appointed may be dismissed without notice.*** | | | | | | | | | Yes/No | | | |
| Present or Most Recent Employment | | | | | | | | | | | | |
| **Name of Employer:**  **Address of Employer:**  **Post Code:** | | | | | | | | | | | | |
| **Job Title:** | | | | | | | | **Dates employed:** | | | | |
| **Current or final salary:** | | | | | | | | **Period of notice required:** | | | | |
| *Please give a brief outline of your main responsibilities:* | | | | | | | | | | | | |
| Previous Employment *Please list all previous employment in chronological order (most recent first)* | | | | | | | | | | | | |
| Dates from and to | Name & Address of Employer | | | | Job Title and outline of main responsibilities | | | | | | Reason for leaving | |
|  |  | | | |  | | | | | |  | |
| Education & Qualifications*Please give details of all educational qualifications obtained and those currently being pursued* | | | | | | | | | | | | |
| Name of School, College, University, etc | | Dates attended from and to | | | | Subjects studied / qualifications worked towards | | | | | | Grades and year obtained |
|  | |  | | | |  | | | | | |  |
| Training *This includes trade/professional training, government training schemes,*  *apprenticeships, short courses and secondments* | | | | | | | | | | | | |
| Course Title | | | Organisation | | | | | | | Dates | | |
|  | | |  | | | | | | |  | | |
| Membership of Professional Institutes | | | | | | | | | | | | |
| Institute | | | | Level of Membership | | | | | | | Year of Award | |
|  | | | |  | | | | | | |  | |
| Other Experience *Details should be given for any period not accounted for by full-time employment, education*  *and training, e.g. unemployment or voluntary work* | | | | | | | | | | | | |
| Experience | | | | | | | | | | From/To | | |
|  | | | | | | | | | |  | | |
| Information in Support of Your Application If further space is needed, please continue on a separate A4 sheet | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| References | | | | | | | | | | | | |
| **Referee 1** | | | | | | | **Referee 2** | | | | | |
| Name: | | | | | | | Name: | | | | | |
| Job Title: | | | | | | | Job Title: | | | | | |
| Name of Organisation: | | | | | | | Name of Organisation: | | | | | |
| Address:  Post Code: | | | | | | | Address:  Post Code: | | | | | |
| Tel No: | | | | | | | Tel No: | | | | | |
| Email Address: | | | | | | | Email Address: | | | | | |
| How long have you known this person and in what capacity? | | | | | | | How long have you known this person and in what capacity? | | | | | |
| **Please note that referees will not be contacted prior to interviews. References will be taken up once an offer has been accepted by the successful candidate.** | | | | | | | | | | | | |
| Rehabilitation of Offenders Act 1974 | | | | | | | | | | | | |
| Please give details of any “unspent” convictions as defined in the Rehabilitation of Offenders Act 1974. Unless the nature of the position permits our Interview Panel to ask questions about your entire criminal record we only ask about “unspent” convictions. A criminal record will not necessarily be a bar to obtaining a position with the council. | | | | | | | | | | | | |
| Additional Information | | | | | | | | | | | | |
| Do you hold a current driving licence? Yes/NoIf YES, please state the type of licence you hold: | | | | | | Are you a car owner? Yes/NoIf NO, do you have access to a car? Yes/No | | | | | | |
| Do you have any current endorsements? **Yes/No**  If YES, please specify: | | | | | | | | | | | | |
| Declaration | | | | | | | | | | | | |
| I declare that the information contained in the application form is true and correct and may be treated as part of any subsequent contract of employment. I understand that any false or misleading information, or omissions concerning criminal convictions, may disqualify my application or may render my Contract of Employment, if I am appointed, liable to dismissal without notice. I understand that any appointment made is subject to receipt of satisfactory medical clearance, references, where appropriate Disclosure Barring checks and completion of satisfactory probation period.  **Data Protection**:  If I accept employment with Totton & Eling Town Council, I consent to my personal information being held by them for the administration of my Contract of Employment. Completion and submission of this form confirms that I consent for Totton & Eling Town Council to confidentially store the above details for HR purposes **only** for the regulated period.  Signed: Date:  Name:  *If this form has been completed electronically, please indicate your consent .* **Yes/No** | | | | | | | | | | | | |