A close-up of a logo

Description automatically generated

**JOB APPLICATION**

|  |  |
| --- | --- |
| Post Applied For: |  |

**Private and Confidential**

Please complete all sections in full, in **black** ink or typescript

**Personal Information**

|  |  |
| --- | --- |
| Full Name: |  |
| Address: |  |
| Telephone Number (home or mobile): |  |
| E-mail address: |  |

**Employment**

You may continue on a separate sheet of paper if necessary.

|  |  |  |
| --- | --- | --- |
| Dates From and To: | Name and Address of Employer: | Job Titles and Duties: |
|  |  |  |
|  |  |  |
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|  |  |  |
|  |  |  |

**Education**

|  |  |  |
| --- | --- | --- |
| *School/college/university/further education provider* | Subjects studied | Results/grades |
|  |  |  |

|  |
| --- |
| Other qualifications and training relevant to this post: |

**General**

|  |  |
| --- | --- |
| Please use this space to explain why you are applying for this post and to give any additional information you feel may be relevant to your application.  Please include any voluntary/social/sports or other activity where skills and experience have been gained that may assist you in your application. You may continue on a separate sheet of paper if necessary.  You are advised to use the Job Description and Personal Specification as an indicator of the skills, experience and attributes that are required.  ………./continued | |
| Are you entitled to work in the United Kingdom | YES/NO |
| Have you any criminal convictions you should disclose? If so, please give details (other than for spent convictions under the Rehabilitation of Offenders Act 1974, see explanatory notes). | |

**References**

|  |  |
| --- | --- |
| Please give the name, address and telephone of two referees. At least one should be a present or most recent employer. Please indicate in what capacity you know the referees. We may contact them before an employment offer is made. We will not ask your current employer until we have received your permission. | |
| Name:  Position:  (if applicable)  Address:  Post Code:  Telephone number:  In what capacity known: | Name:  Position:  (if applicable)  Address:  Post Code:  Telephone number:  In what capacity known: |

*Any information given in this application form may be retained on computer or in our records. It will be used by the Council for the specific purposes for which it was collected. It will not be exchanged or sold to any third party.*

**Declaration:**

I confirm that to the best of my knowledge the information I have provided on this form is correct and I accept that providing deliberately false information could result in my dismissal.

|  |  |
| --- | --- |
| *Signed:* | *Date:* |