**Application for Employment**

Please complete clearly, continuing on separate sheets if necessary.

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| --- | --- |
| Role applied for: |  |

1. PERSONAL DETAILS

|  |  |
| --- | --- |
| First name/s: | Last name: |
| Address: | Telephone number: |
|  | Daytime: |
|  | Evening: |
|  | Mobile: |
| Postcode: | Email address: |

2. EMPLOYMENT HISTORY - Present or most recent employment

|  |  |
| --- | --- |
| Name of employer: |  |
| Job title: |  |
| Salary: |  |
| Dates from / to: |  |
| Period of notice / date available to start: |  |
| Key responsibilities: |  |

Reason for seeking new position/leaving:

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3. PREVIOUS EMPLOYMENT

**Please start with the most recent** *including any unpaid or voluntary work. Continue on separate sheet if necessary.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Job title and brief outline of duties | Name and address of  employer | Dates  From – to  mth & year) | Final Salary | Reason for leaving |
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|  |  |  |  |  |

Please give details and an explanation for any gaps in your employment history:

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4. EDUCATION, TRAINING AND DEVELOPMENT

**Secondary school/college/university/apprenticeship** *including current studies, with the most recent first.*

|  |  |  |  |
| --- | --- | --- | --- |
| Name of institution | Full/part-time | Courses/subjects taken | Qualifications  /grade |
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|  |  |  |  |
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*NB. We reserve the right to contact employers or educational establishments to verify details given.*

**Details of any relevant learning and development.** Please include dates.

(e.g. short courses, first aid, computer skills, work-based NVQ etc., and any current courses.)

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**Professional / Technical membership**

|  |  |
| --- | --- |
| Name of professional / technical body | Grade of membership |
|  |  |
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5. SUPPORTING STATEMENT

Please read the job description and person specification. Using examples, show how your knowledge, skills and experience meet each of the essential requirements of the person specification and as many desirable requirements as possible. Please draw on your relevant experiences; including paid employment, voluntary work, family experiences and leisure activities as evidence.

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***Please continue on a separate sheet if necessary.***

6. ADDITIONAL INFORMATION

We are committed to interviewing people with a disability who meet the essential criteria of the person specification. The Disability Discrimination Act defines a person as having a disability if he or she has,” a physical or mental impairment which has a substantial and long-term adverse effect on his or her ability to carry out normal day to day activities”.

Do you have a disability? Yes No

We will make reasonable adjustments to help a person with a disability through the application & selection process and, if successful, to assist you in carrying out the duties of your job. Please see the applicant guidance notes for further information.

Are you eligible to work in the UK? Yes No

Do you require a work permit? Yes No

Do you, your partner or family have any interests (financial, professional, other)

that may conflict with Beaconsfield Town Council employment? Yes No

(If yes, attach details)

Are you related to an elected Member of the Council? Yes No

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| If yes, give name and relationship: |

**Note:** Soliciting support or information to give an unfair advantage may disqualify your application.

7. REFERENCES

Please give details of two referees, one of whom should be your most recent employer. If you are in, or have just completed full-time education, one referee should be from your school, college or university. Referees must not be related to you, or writing solely in the capacity of a friend, and must be able to comment on your skills and abilities in relation to the post. If a post requires additional references this will be detailed in the application pack.

**References may be taken up before an interview or offer of employment, unless you request otherwise.**

|  |  |
| --- | --- |
| Name: | Name: |
| Address: | Address: |
| Tel no: | Tel no: |
| Email: | Email: |
| Occupation/Relationship: | Occupation/Relationship: |
| How long have they known you? | How long have they known you? |
| I agree to this reference being taken up before an interview  or offer of employment being made: Yes No | I agree to this reference being taken up before an interview  or offer of employment being made: Yes No |

I declare that the information given in this application is, to the best of my knowledge, complete and accurate and that it may be used for purposes registered by the Council under the Data Protection Act.  I understand that if, after appointment, any information is found to be inaccurate, this may lead to dismissal without notice.

|  |  |
| --- | --- |
| Signature: | Date: |

Where did you see the advertisement for this post?

**DATA PROTECTION ACT 2018.** INFORMATION FROM THIS APPLICATION MAY BE PROCESSED FOR ANY PURPOSES REGISTERED BY THE TOWN COUNCIL UNDER DATA PROTECTION LEGISLATION. INDIVIDUALS HAVE THE RIGHT OF ACCESS TO PERSONAL DATA HELD ABOUT THEM BY THE TOWN COUNCIL. THIS INFORMATION WILL BE DISCLOSED ONLY TO THOSE PERSONS AUTHORISED TO SEE IT, WILL BE USED FOR THE SELECTION PROCESS AND, FOR SUCCESSFUL CANDIDATES WILL BE RETAINED ON THEIR PERSONNEL FILE, USED FOR PAYROLL AND ADMINISTRATIVE PURPOSES AND MAY BE DISCLOSED TO GOVERNMENT DEPARTMENTS WHERE THERE IS A LEGAL OBLIGATION TO DO SO. INFORMATION HELD ABOUT UNSUCCESSFUL CANDIDATES WILL BE DESTROYED AFTER 6 MONTHS.

TO COMPLETE YOUR APPLICATION PLEASE SAVE THE APPLICATION WITH YOUR NAME IN THE TITLE TO YOUR

COMPUTER AND UPON COMPLETION FORWARD TO

[Clerk@BeaconsfieldTownCouncil.gov.uk](mailto:Clerk@BeaconsfieldTownCouncil.gov.uk)