

Application for Employment

When you have completed this application form, please return it by email to: Sarah Summers, Town Clerk sarah.summers@stratford-tc.gov.uk

Personal Information (confidential)

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| Position applied for: |
| **PERSONAL DETAILS** |
| Title: |  |
| Surname: |  |
| First Name: |  |
| Address: |
| Email: |  |
| Telephone (landline): |  |
| Telephone (mobile): |  |
| Planned holiday dates: |  |
| Would you regard yourself as having a disability? | Yes |  | No |  |
| Do you require any adjustments to our recruitment/interview process due to a disability? | Yes |  | No |  |
| If YES, please specify: |
| Do you hold a current driving licence? | Yes |  | No |  |
| Are you a car owner? | Yes |  | No |  |
| Do you have a current right to work in the UK? | Yes |  | No |  |
| If no, please provide details. |
| **EDUCATION** |
| Please provide your education history here: |
| Schools/Colleges/University | Date and Qualification gained |
|  |  |
| **PRESENT EMPLOYMENT** (or, if unemployed; last employment): |
| Name and Address of current/last employer:Post title:Salary:Date appointed to post:Notice period required: |
| **EMPLOYMENT HISTORY** Please list your past employers, starting with your present or most recent job and working backwards |
| Name and address of employer(s) | Job title and main duties | Date of departure and reason for leaving |
|  |  |  |
| Please note here any other employment or voluntary work that you would wish to continue with if you were to be successful in obtaining this role: |
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| **REFERENCES** |
| Please give details of two referees; **The second of which must be your current/last employer**. *If you do not wish your current employer to be approached for a reference prior to a job being offered to you,**please state this here:* |
| 1.Name:Position/Relationship to you:Address:Email:Phone: | 2.Name:Position/Relationship to you:Address:Email:Phone: |
| **SKILLS, QUALITIES AND EXPERIENCE** |
| Please describe the **SKILLS, QUALITIES AND EXPERIENCE** that you would bring to this role. Include expertise both in and outside paid employment e.g., your current or any other job, voluntary work, leisure interests, domestic work, study etc. Information provided in this part of your application should clearly demonstrate how you meet the requirements of the post as described in the person specification. |
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| **PROFESSIONAL DEVELOPMENT**  |
| Please provide evidence of relevant training courses, CPD and any memberships\* of professional bodies etcrelevant to this post**\***please indicate whether by examination or election |
|  |
| **ADDITIONAL INFORMATION** |
| Are you related to a serving Stratford-upon-Avon Town Councillor or a member of staff? **YES/NO**If YES, please give details below: |
| **CRIMINAL RECORD** |
| Under the Rehabilitation of Offenders Act 1974 certain convictions become “spent” after a specified period of time, and those with spent convictions are not required to disclose the conviction on application forms if asked to do so.  |
| **Q:** Have you ever been convicted of a criminal offence in the past which has not become “spent” under the Rehabilitation of Offenders Act 1974? | Yes |  | No |  |
| **Q:** Are you subject to pending criminal prosecution or proceedings?  | Yes |  | No |  |
| Please give the nature of any “unspent” convictions or pending criminal proceedings (not including minor traffic offences). If you are in doubt about your answer to the above question(s), ensure that you obtain clarification of your circumstances before making an application. |
| **Data Protection Statement** |
| The information you have supplied with this application may be processed by computer or form the basis of manual records. Stratford-upon-Avon Town Council requires this information for operational purposes relevant to the payment of remuneration, pensions, and the maintenance of a personnel system for all its employees. Where your application has been unsuccessful your details will be held for six months and will then be destroyed. Recruitment monitoring information may be held for up to two years, to assist in the compilation of statistics.Candidates may be asked to undertake psychometric testing. By signing this application form candidates agree to Stratford-upon-Avon Town Council passing their name and email address on to an external testing provider in order for the provider to be able to administer the test(s).  |
| **Declaration** |
| I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment offered. I understand that any offer of employment is subject to the Council being satisfied with the results of a series of relevant checks including references, eligibility to work in the UK, criminal convictions, probationary period, and a medical report (in line with the operation of the Equality Act 2010). I understand that canvassing of councillors or staff directly or indirectly will invalidate this application. |
| **DECLARATION and CONSENT:****I declare that the information given on this form is true, and I consent to its use as described above.** |
| **Signed:** | **Date:** |  | Date: |