

STOTFOLD TOWN COUNCIL

APPLICATION FORM FOR EMPLOYMENT

PLEASE COMPLETE ALL SECTIONS OF THIS FORM IN BLACK INK, OR TYPED ALL SECTIONS SHOULD BE COMPLETED. DO NOT STATE 'REFER TO CV'

Position applied for :
Full name:
Address: Mobile:
Postcode:
Email:

Present/Last appointment

Name and address of Employer	Position Held	Salary & other benefits (if any)
	Date of appointment	Length of notice required

Brief summary of duties and responsibilities

Are you currently in employment? YES/NO If no please specify when last appointment ended

Secondary education and qualifications

Secondary education and quanneations			
Name of educational establishment	From	То	Qualifications gained

Higher Education

Higher Education			
Name of educational establishment	From	То	Qualifications gained
Membership of professional bodies	Membership	Date	Was membership
	grade		gained by examination?

Previous appointments held (most recent first)

Only go back ten years unless previous experience is particularly relevant to the post

Employer	From	То	Position held	Salary on leaving &
1 5	Month/Year	Month/Year		reason for leaving

Details of relevant experience and other supporting information – please refer to the Job Description and Person Specification for the position applied for

Name:	Position applied for:
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Further information please place a \checkmark in the appropriate box

1. Do you possess a current driving licence?	YES	NO
2. If yes, do you have regular use of a car during working hours?		
3. Are you subject to any legal restrictions in respect of your employment in the UK?		
Please provide your national insurance number		
4. Are you, to your knowledge, related to any Member of Officer of		
Stotfold Town Council?		
5. Do you hold any other position that would continue if you		
were appointed to this position?		
6. Have you ever been convicted of a criminal offence?		
(Declaration subject to the Rehabilitation of Offenders Act 1974)		
7. If you have a disability please tell us about any adjustments we may	need to make	to assist
you at interview:		
If you have answered yes to either 3, 4 or 5 above please give details be	elow	

References

	Please tick if you would prefer us NOT to contact your present employer without further reference to yourself
	Please give the names and full addresses of two persons to whom references can be made - the first should be your
presen	t / last employer, if applicable

Name:	Name:
Job Title:	Job Title:
Company:	Company:
Address:	Address:
Telephone No:	Telephone No:

Declaration

I declare that the foregoing information is correct to the best of my knowledge and belief and that in particular I have not omitted any material facts, which may have any bearing on my application. I understand that any subsequent contract of employment with the Town Council will be made only on this basis. Falsification of information could lead to dismissal.

Signed:

Dated:

Canvassing of Members or Officers of the Council directly or indirectly in connection with this application will automatically disqualify the candidate.