APPLICATION FORM BRIDPORT TOWN COUNCIL



Confidential

Please complete in black ink and return to address on last page

Closing date:	11am Friday 21 st July 2017
Appointment of:	Cleaner/Caretaker
Where did you see the advertisement?	

PERSONAL DETAILS

Surname:	First names:
	Tolophone Numberg
Home Address:	Telephone Numbers
	Home:
	Work:
	Mobile:
Email:	Can we contact you at work? Yes/No
Post Code:	
Preferred title e.g. Mr, Mrs, Ms etc.	Valid Driving Licence Yes/No
N.I. Number	Penalty Points Yes/No Number:
	Do you have access to a car Yes/No
Are you related to or are the spouse / partner of any councillor or employee of Bridport Town Council? Yes / No	
If yes, please give detail:	
Canvassing will disqualify your application or if appointed make you liable to dismissal.	

EDUCATION AND TRAINING			
From	То	Schools etc (latest first)	Qualifications attained with grades

MEMBERSHIP OF PROFESSIONAL INSTITUTIONS			
Organisation	Membership Status	Date Awarded	

EMPLOYMENT HISTORY (most recent employment first)						
Please indicate all previous positions held including any with this Council						
Present Position: Present Employer: (including location)						
Date	Current Salary:			Reason for wishing to leave:		
started	Benefits					
	Denents					
From	То	Previou	s positions	Employer and Location	Reason for Leaving	
CERTIFICATED COURSES ATTENDED						
Course Organisation				1	Date Attended	
NOTICE Please state the period of notice you are required to give in your present job:						

INFORMATION IN SUPPORT OF YOUR APPLICATION

This should include the following:

1. Reasons for this application

2. How your skills, experience and personal qualities relate to the job requirements – see person specification on job description. You are welcome to also include examples of voluntary / unpaid work, which you feel support this. Please continue on a separate sheet if necessary.

RFFRF	NCES	
REFERENCES Please provide two referees with knowledge of your work / character. One should be your most recent employer. If one of your referees is a personal one, the referee cannot be related to you in any way. References are "in confidence".		
a) EMPLOYER		
NAME. JOB TITLE. ADDRESS	Phone:	
b) OTHER REFERENCE		
NAME JOB TITLE ADDRESS		
E-Mail:		
INTERESTS O	RHOBBIES	
RIGHT TO W	ORK IN UK	
Are you legally entitled to work in the UK Yes/ We will require evidence of this prior to comment		
CRIMINAL RECORD	HEALTH	
Have you ever been convicted of a criminal offence? Yes/No If YES , please give details:	For health reasons, do you require any adjustments for the interview and selection process? Yes/No If YES , please give details:	
Declaration subject to the Rehabilitation of Offenders Act 1974:		

DATA PROTECTION

The Data Protection Act 1998 ("the Act") sets out certain requirements for the protection of your personal information against unauthorised use or disclosure. The Act also gives you certain rights. Except to the extent we are required or permitted by law, the information which you provide in this application form and any other information obtained or provided during the course of your application ("the information") will be used solely for the purpose of assessing your application. If your application is unsuccessful or you choose not to accept any offer of employment we make, the information will not be held for longer than is necessary, after which time it will be destroyed, although relevant information will be retained in the longer term to facilitate our equal opportunity monitoring. If your application is successful, the information will form part of your employment. So that we may use the information for the above purposes and on the above terms, we are required under the Act to obtain your explicit consent. Accordingly, please sign the consent section below. I CONSENT TO MY PERSONAL INFORMATION BEING USED FOR THE PURPOSES AND ON THE TERMS SET OUT ABOVE.

Signed.....Dated.....

UNDERTAKING

Please read and sign the following undertaking: I confirm that the information I have given on this application form is, to the best of my knowledge and belief, true in all respects. I understand that, should I have deliberately made a false or misleading statement on this form my future employment can be terminated without notice.

Signed.....Dated.....

Note: We are an equal opportunities employer and will not tolerate discrimination in any form.

Completed and signed application forms should be sent to: Terri Foxwell, Bridport TIC, Bridport Town Hall, Bucky Doo Square, South Street, Bridport, DT6 3LF <u>tfoxwell@bridport-tc.gov.uk</u>