

Return Applications to
 Filton Town Council
 Elm Park, Filton
 South Gloucestershire BS34 7PS



Confidential
 Reference
 Number

Committed to Equalities

APPLICATION FOR EMPLOYMENT

C.V.'s may accompany this form but please complete the form in full
 This form may be photocopied so please complete in black ink

POST DETAILS (to be completed in block capitals)	
Application for the post of:	
Post Reference No.	
Where did you learn of the vacancy?	
Section 1 PERSONAL DETAILS	
Surname	
Title by which you wish to be referred: (Mr, Mrs, Miss, Ms, etc)	
Forename(s)	
Address	
Postcode	
Home Telephone No.	
E-mail address	
National Insurance No.	
Have you ever held a justices licence	YES/NO
Do you hold a full driving licence?	YES/NO
Do you have regular use of a vehicle	YES/NO
Are you legally entitled to work in the EU	YES/NO



**Section 2
PRESENT EMPLOYMENT**

(or last employment if not currently employed)

Name and Address of Employer	
Post Code	
Telephone No.	
Job Title	
Start Date	
Leaving Date (if applicable)	
Present Salary	
Reason you wish to leave this post	
Period of Notice required	
Brief Outline of Duties	

**Section 3
PREVIOUS EMPLOYMENT**

Start with the most recent.

Employer	
Post Held	
Dates	
Salary	
Reason for Leaving	
Employer	
Post Held	
Dates	
Salary	
Reason for Leaving	

**Section 4
EDUCATION (from age 11)**

Secondary schools/dates	
Qualifications gained	



Section 5**FURTHER EDUCATION AND PROFESSIONAL QUALIFICATIONS**

College/University

Dates

Qualifications gained

Section 6**TRAINING**

(please list your training starting with the most recent) Please use separate sheet if required.

Course and Length of Course

Section 7**SKILLS, ABILITIES, KNOWLEDGE AND EXPERIENCE**

This section is the most vital part of the form. We need you to give us specific information in support of your application in order for us to shortlist in a fair and unbiased way. Please use the criteria in the Employee Specification as headings for your response. Please continue on a separate sheet of paper

Section 8**INTERVIEW DATES**

Interview dates will be.....
Please advise us if you will be unable to attend and if it is possible we may arrange a new time with suitable candidates

Section 9 HEALTH	
How many days were you absent due to sickness in the past 2 years?	
Please give details of absences of 5 days or more	
Section 10 REFERENCES	
#1 Name	
Address	
Postcode	
Telephone no.	
In which capacity known to you	
#2 Name	
Address	
Postcode	
Telephone no	
In which capacity known to you	
Section 11 COUNCIL RELATIONSHIPS	
Are you related to any employee or Councillor of Filton Town Council?	YES/NO
If YES, give their name, position and relationship	
Section 12 CONVICTIONS	
(Rehabilitation of Offenders Act 1974) Under the above Act, most sentences awarded by a Court for criminal offences may be regarded as spent and disregarded, and after a specified period of time need not be disclosed. However, if the appointment for which you have applied is one to which the Rehabilitation of Offenders Act (Exceptions) Orders apply, you are required to declare any criminal convictions and enquiries and checks may be made in that respect. It is your responsibility to distinguish between those convictions which require to be declared and those that do not and enquiries and checks may be made in that respect.	
Any convictions declared: <i>If YES please state details</i>	YES/NO
DECLARATION I declare that to the best of my knowledge the information on this application is true. I understand that if the information I have supplied is false or misleading in any way, I will automatically be disqualified from appointment or dismissed without notice.	
Signed	Dated
DATA PROTECTION ACT <i>Under the terms of the Data Protection Act 1998 the information provided on this form will be held in confidence and used for the purpose of Recruitment and Selection and Personnel Administration and no other purposes.</i>	