

Totton & Eling Town Council

Application Form - Private and Confidential

Please complete ALL sections in type or black ink and use only A4 size paper as continuation sheets as required. **Please return to the Sadie Stringer, HR Manager, Civic Centre, Totton, Hampshire, SO40 3AP**

Job Details				
Post applied for:				
Where did you see the post advertised?	(This will help us with advertis	ing future posts)		
	Perso	nal Details		
Surname: Forename(s):		Forename(s):		
Preferred title (e.g	Mr/Mrs/Miss/Ms/Dr/Other):			
Address: Post Code:				
Telephone numbe	rs	Mobile:		
National Insurance No.		Work: Home:		
Personal email:				
(This email address will be used to communicate with you throughout the recruitment process to send acknowledgements, invitations to interview & outcomes where appropriate)				
Immigration, Asylum and Nationality Act 2006				
It is a criminal offence to employ persons whose immigration status prevents them from working in the United Kingdom. Prior to appointment, you will be required to provide evidence of a passport or other documents on the approved list to satisfy us that the Asylum and Immigration Act 1996 is being complied with.				

Do you require a work permit to work in the UK? If yes, please provide details:	Yes/No

Relationship to any Council member/employee		
To your knowledge, are you related to any member or employee of the Yes/No		
council? If Yes, please provide details:		
Failure to disclose such a relationship and/or canvas		
from appointment, and if appointed may be dismiss		
Name of Employer:	ecent Employment	
Name of Employer.		
Address of Employer:		
Post Code:		
Job Title:	Dates employed:	
Current or final salary:	Period of notice required:	
Please give a brief outline of your main responsibilities:	•	

Previous Employment in chronological order (most recent first) Dates from and to Reason for leav responsibilities Image: State of the state o								
and to Employer responsibilities Person Subjects Studied / qualifications Grades and Marce Studied / qualifications Studied / studied / studied / studied / studied / studied / studied		first)	ost recent f				Please list all pre	
Education & Qualifications Please give details of all educational qualifications obtained and those currently being pursued Name of School, College, Dates attended Subjects studied / qualifications Grades and	ving	ason for leav	Rea			s of		
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Iniversity, etc from and to worked towards obtained	l year	Grades and						
					to	from and		

	Training	
	fessional training, government training ships, short courses and secondments	schemes,
	Organisation	Dates
Members	ship of Professional Institutes	
Institute	Level of Membership	Year of Award
	Other Experience	
	eriod not accounted for by full-time emp	
Experience	e.g. unemployment or voluntary work	From/To

Informa If further space	tion in Support is needed, please co	of Your Applicat	ion A4 sheet	

Rofo	rences			
Referee 1	Referee 2			
Name:	Name:			
Job Title:	Job Title:			
Name of Organisation:	Name of Organisation:			
Address:	Address:			
Post Code:	Post Code:			
Tel No:	Tel No:			
Email Address:	Email Address:			
How long have you known this person and in what capacity?	How long have you known this person and in what capacity?			
Please note that referees will not be contacted prio offer has been accepted by the successful candidate	r to interviews. References will be taken up once an e.			
Rehabilitation of Offenders Act 1974				
Please give details of any "unspent" convictions as de Unless the nature of the position permits our Intervie record we only ask about "unspent" convictions. A c obtaining a position with the council.	ew Panel to ask questions about your entire criminal			

Additional Information			
Do you hold a current driving licence? Yes/No A	Are you a car owner? Yes/No		
If YES, please state the type of licence you hold: If	f NO, do you have access to a car? Yes/No		
Do you have any current endorsements? Yes/No If YES, please specify:			
Decla	iration		
omissions concerning criminal convictions, may disqu Employment, if I am appointed, liable to dismissal wit made is subject to receipt of satisfactory medical clea Barring checks and completion of satisfactory probati Data Protection :	nderstand that any false or misleading information, or ualify my application or may render my Contract of thout notice. I understand that any appointment arance, references, where appropriate Disclosure tion period. uncil, I consent to my personal information being held ployment. Completion and submission of this form		
Signed: Date	e:		
Name:	e indicate vour consent - Yes/No		
If this form has been completed electronically, please	e indicate your consent - Yes/No		