

APPLICANT NO.



EMPLOYMENT APPLICATION FORM

(CONFIDENTIAL)

INVESTOR IN PEOPLE

POST NO:	POST TITLE:
PERSONAL PARTICULARS (BLOCK CAPITALS)	
Surname:	National Insurance No:
Forenames(s):	
Address:	Please say when you will be <u>unavailable</u> for interview within the next six weeks
Postcode:	How much notice are you required to give (if you are not in employment when would you be free to start)?
Home Telephone No (inc. STD)	
Mobile No:	
E-mail address:	
Work Telephone No:	Are you applying for FULL TIME/PART TIME
Can we contact you there YES/NO	
Do you hold a full current Driving Licence YES/NO	Do you own, or have use of a car? YES/NO
EMPLOYER REFERENCES	
Please give details of two people who we can approach for an employment reference. One <u>MUST</u> be your present or most recent employer (or personal tutor in the case of a student). The Authority will not apply for references until permission has been given by the applicant.	
Name Occupation Address	Name Occupation Address
Telephone No (inc. STD):	Telephone No (inc. STD):
Email:	Email:
Permission given to contact YES/NO	Permission given to contact YES/NO
EMPLOYMENT PARTICULARS	
Name and address of current employer:	Position Held
	Date Employment Commenced
	Salary
	Are you a member of a Pension Scheme YES/NO
Email:	
Brief description of duties/responsibilities	

PREVIOUS EMPLOYMENT (MOST RECENT FIRST)

Employer and Nature of Business	Position Held	Reason for Leaving

EDUCATION

Examinations Taken and Grades Obtained

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Courses, Degrees, Diplomas and Grades Obtained

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SHORT AND PART TIME COURSES

Details – (inc. any relevant in-house training)

MEMBERSHIP OF PROFESSIONAL BODIES

Details – (please state whether achieved by examination or experience)

OTHER SKILLS

(inc. languages and your proficiency in them; software packages and the level achieved)

WHAT ACTIVITIES OUTSIDE WORK INTEREST YOU?

(inc. any positions you hold you consider relevant)

PLEASE NOTE:**COMPLETION OF FORM**

The Council is seeking to ensure that it appoints the right candidate to the job and that applications for employment are treated in a fair and consistent manner. The various sections of the form ask for information that is necessary to ensure that this can be achieved. Candidates **MUST** complete fully all sections of the application form in sufficient detail to ensure that the application form can be properly evaluated. If you do not complete the form fully, you run the risk that your application will not be processed further. You can, of course, support the application form with additional information.

REASONS FOR APPLICATION

Please use the space below to explain how your knowledge, skills, experience and qualities meet the job description and person specification. Give **brief** examples of any relevant experience you have gained in your current or previous jobs, from community or voluntary work or from your leisure interests. If you are short listed for an interview, you will have the opportunity to give us more information. (Additional sheets may be attached to this form)

HOW DID YOU FIND OUT ABOUT THIS VACANCY?

(If from a publication, please state which one)

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENCE?

YES/NO

If **YES**, please give details on a separate form. You need not include convictions which are "spent" under the Rehabilitation of Offenders Act, 1974, unless the post for which you are applying has substantial access to children and a Criminal Records Disclosure is to be requested (as indicated in the job advertisement or supporting recruitment literature).

ARE YOU RELATED TO ANY MEMBER OR OFFICER OF THIS AUTHORITY?

YES/NO

(If YES, please give details) Canvassing of members of the Council shall disqualify the candidate for the appointment.

I declare that the details given in this application are correct to the best of my knowledge and belief, and that I may be required to provide documentary evidence to substantiate certain information eg birth certificate, examination certificates etc. I understand that giving false information will disqualify me from being appointed or, if appointed may result in my dismissal.

SIGNED: *

DATE:

Please return your completed form to: jobs.hrpartnership@dover.gov.uk, or EKHRP, PO Box 453, Dover, CT16 9DQ.

THE COUNCIL IS AN EQUAL OPPORTUNITIES EMPLOYER

No acknowledgement for applications will be made. If you have not been contacted within one month of the closing date you should assume your Application has not been successful