

Application for employment

Part A - Monitoring sheet

The Council is committed to promoting a diverse workforce and to active policies, which eliminate unfair discrimination. It does not discriminate on any grounds other than the ability to carry out the job. Monitoring is essential to ensure that the policies are being properly implemented and your answers to the questions below will provide statistical information with which to review the Council's policies and procedures.

Part A will be detached before your application is considered. Any information given will be held in strict confidence and will not affect your application. We ask for your co-operation in completing this sheet.

JOB DETAILS

Post applied for	Department
Ref No.	Closing Date
Where did you hear about this vacancy?	

PERSONAL DETAILS

Last name		First name(s)	
Mr / Mrs / Miss / Ms / Dr / other, please specify		Gender	
Date of birth		Age	
Nationality		Place of birth	
Address		Home tel number	
		Business number	
		Mobile Number	
Postcode		Email address	
May we contact you at work?		Yes <input type="checkbox"/> No <input type="checkbox"/>	

ETHNICITY

Which is your ethnic group? Choose ONE section from A to E, then tick the appropriate box to indicate your cultural background.

A White	B Mixed	C Asian or Asian British
White British <input type="checkbox"/>	Mixed White and Black Caribbean <input type="checkbox"/>	Indian <input type="checkbox"/>
White Irish <input type="checkbox"/>	Mixed White and Black African <input type="checkbox"/>	Pakistani <input type="checkbox"/>
Any other White background <input type="checkbox"/>	Mixed White and Asian <input type="checkbox"/>	Bangladeshi <input type="checkbox"/>
	Any other Mixed background <input type="checkbox"/>	Any other Asian background <input type="checkbox"/>
D Black or Black British	E Chinese or other ethnic group	
Black or Black British Caribbean <input type="checkbox"/>	Chinese <input type="checkbox"/>	
Black or Black British African <input type="checkbox"/>	Any other ethnic group <input type="checkbox"/>	
Any other Black background <input type="checkbox"/>	Please specify: _____	

DISABILITY

Do you consider that you have a disability? Yes No

If 'Yes', please state the nature of the disability. Would you need any adjustments to be made to carry out this role?

Do you need any special assistance in attending interview? If so, please give details:

(The Disability Discrimination Act defines a disability as a physical or mental impairment, which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities.)

If you wish, you may disclose information about yourself in this section about your:

Religion	
Sexual orientation	

If an offer of employment is made, you will be required to complete a medical questionnaire. You will be asked to send this direct to our occupational health advisers who may recommend a medical assessment. All employment is subject to the receipt of medical clearance satisfactory to the council.

ELIGIBILITY

Do you have the legal right to work in the UK? (please circle) **Yes / No**

If 'Yes', and there are conditions attached, for example start or finish dates, please specify:

If 'No', what type of work permit do you require?

Please provide your National Insurance Number	
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Rehabilitation of Offenders Act 1974 (Convictions, Bind-Over Orders, Cautions and Court Action Pending)

Have you any criminal convictions Yes No if so please specify the details below,

or if you have a bind-over order, caution or court action pending, including offences committed in the Armed Forces.

- i) Convictions deemed 'spent' under the Rehabilitation of Offenders Act 1974 need not be disclosed.
- ii) Certain posts require us to ask about all convictions whether spent or not. If this is the case for the post you are applying for this will be identified in the terms and conditions attached to this post. If you are required to disclose all convictions, 'spent' or 'unspent' within the ROA 1974 (Exemptions) Order 1975, you may be asked for details at interview. Successful applicants for these occupations will be subject to Police clearance.

Date	Nature of Offence	Sentence or Verdict

PERSONAL RELATIONSHIP

Any overt or covert canvassing, by a candidate, of any elected member or employee, directly or indirectly, in connection with an appointment will lead to disqualification of the candidate. Discovery after the appointment may lead to dismissal.

Have you any friends or relatives employed by the Council? If so, please provide name(s) and relationship:

Have you applied to the Council before? If so, please provide details of post applied for and approximate date:

I confirm that the above information is correct to the best of my knowledge. I consent to the Council processing, by means of a computer database or otherwise, any information I provide them for the purpose of employment by the Council.

Name

Date

DATA PROTECTION STATEMENT

The information that you provide on this form and that obtained from other relevant sources will be used to process your application for employment. The personal information that you give us will also be used in a confidential manner to help us monitor our recruitment process.

If you succeed in your application and take up employment with us, the information will be used in the administration of your employment with us and to provide you with information about us or a third party via your payslip. We may also use the information if there is a complaint or legal challenge relevant to this recruitment process.

We may check the information collected, with third parties or with any other information held by us. We may also use or pass to third parties, information to prevent or detect crime, to protect public funds, or in other ways permitted by law.

By signing this application form we will be assuming that you agree to the processing of sensitive personal data (as described above), in accordance with our registration with the Information Commissioner.

DECLARATION

I declare to the best of my knowledge and belief, all particulars I have given in all parts of this application form are complete and true. I understand that any false declaration or misleading statement or a significant omission may disqualify me from employment and render me liable to dismissal. I understand that any job offer is subject to references, checks on relevant qualifications, other checks necessary for compliance with BPSS (see advisory notes), DBS Check (if applicable to the role), a probationary period and a medical check, all of which must be deemed by the organisation as satisfactory.

Signed

Date

Part B – Qualifications and Experience

Post applied for	Service Area
Ref No.	Closing Date

Educational, technical and professional qualifications		
Place of study/professional body	Attainment level/results	
Personal development (including any courses, professional membership, voluntary work or responsibilities you consider relevant, with outcomes where applicable)		
Dates	Provider	Type of development
Languages (indicate fluency)		

Please indicate salary expectation	£	per annum
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Please indicate the names of two referees where requested. We reserve the right to contact any or all of the people named. We will not contact any referee without your permission or until an offer of employment has been accepted. If you do not have two employment referees one may be from your head teacher, lecturer or similar. All employment is subject to the receipt of references satisfactory to the Council.

EMPLOYMENT HISTORY

PRESENT OR LAST EMPLOYER Please provide name, address and telephone number			
Address		Post Code:	
Office Telephone Number		Mobile Number:	
Dates employed	To:	From:	
Position(s) held			
Type of business			
Brief description of duties and key achievements			
Reason for leaving		Current salary £	
Notice required			
Referee's name and position			
Can we contact the referee before interview?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

PREVIOUS EMPLOYER Please provide name, address and telephone number			
Address		Post Code:	
Office Number		Mobile Number:	
Dates employed	To:	From:	
Position(s) held			
Brief description of duties and key achievements			
Reason for leaving		Referee's name & position	
Can we contact the referee before interview?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

PREVIOUS EMPLOYER Please provide name, address and telephone number			
Address	Post Code:		
Office Number		Mobile Number:	
Dates employed	To:	From:	
Position(s) held			
Brief description of duties and key achievements			
Reason for leaving		Referee's name & position	
Can we contact the referee before interview?	Yes <input type="checkbox"/> No <input type="checkbox"/>		

PREVIOUS EMPLOYER Please provide name, address and telephone number			
Address	Post Code:		
Office Number		Mobile Number:	
Dates employed	To:	From:	
Position(s) held			
Brief description of duties and key achievements			
Reason for leaving		Referee's name & position	
Can we contact the referee before interview?	Yes <input type="checkbox"/> No <input type="checkbox"/>		

PREVIOUS EMPLOYER Please provide name, address and telephone number			
Address	Post Code:		
Office Number		Mobile Number:	
Dates employed	To:	From:	
Position(s) held			
Brief description of duties and key achievements			
Reason for leaving		Referee's name & position	
Can we contact the referee before interview?	Yes <input type="checkbox"/> No <input type="checkbox"/>		

Please continue on a separate sheet if necessary.

OTHER WORK COMMITMENTS

Do you have any other work commitments, either paid or unpaid, which you would wish to continue with if offered employment by the Council (please circle)?	Yes / No
Please give details	

You may not, without the prior permission in writing of the Council, be employed or otherwise engaged in any other business, trade or profession either directly or indirectly in any capacity whatsoever.

PERSONAL STATEMENT (This is one of the most important parts of your application)

This is one of the most important parts of your application.

Please use this page to describe details of your skills, abilities, knowledge and experience. Detail why you consider they make you a suitable candidate for this post and how they meet the criteria listed on the person specification. You may also want to indicate leisure time activities, hobbies or voluntary work and any personal achievements or attributes if they are relevant. You may enclose additional sheets but please do not put your name on them.

Please continue on a separate sheet if you wish.

Other (outside) activities or interests, membership of organisations, or commitments to public duties.

Do you have a driving licence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Please give details of any endorsements on your licence		

We normally keep completed application forms for 6 months. Please tick the box if you do **not** want us to keep your application form.

Go Shared Services - Human Resources
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Municipal Offices
Promenade
Cheltenham
GL50 9SA
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Email : vacancies@fdean.gov.uk



