(Please do not attach CVs)



JOB APPLICATION FORM

CONFIDENTIAL

Wayland Hall Middle Street Watton Thetford Norfolk IP25 6AG

Telephone: 01953 881007

Equal Opportunities Statement

Watton Town Council wholeheartedly supports the principle of equal opportunities in employment and oppose all forms of unlawful or unfair discrimination. This policy therefore concerns all matters directly or indirectly related to employment affecting individuals or groups whether they are actual or potential employees.

We believe that it is in the Council's best interests, and those of all who work in them, to ensure that the human resources, talents and skills available throughout the communities are considered when employment opportunities arise.

Every possible step will be taken to ensure that individuals are treated fairly and that decisions on recruitment, selection, training, promotion, career development and employee relations matters [including discipline] are based solely on objective and job related criteria.

Data Protection and Confidentiality Statement

Returning this application form and the enclosed equal opportunities monitoring form will lead to your personal information being processed for the purposes of recruitment, selection and monitoring, which may include:

- a) processing of personal data by the Council for the purpose of recruitment including checking of references and equal opportunities monitoring
- b) processing the personal information of shortlisted candidates to check references and medical records
- c) secure storing of the information for 6 months if you are not offered a post and indefinitely as part of your personnel file if you become an employee of the authority

All applications are treated with the strictest confidence and will only be disclosed to parties outside the Council with the applicant's consent for legitimate recruitment purposes, such as checking references.

Rehabilitation of Offenders Act (1974)

All short-listed applicants will be asked to declare any previous convictions, which are 'unspent'. All information will be treated in confidence and will not necessarily prejudice appointment. Applicants for jobs which involve access to persons under the age of 18 are not subject to the Act (i.e. any previous convictions cannot be regarded as 'spent').

Information on this page will not be used for shortlisting

Application for the post of:	Job reference number:
Town Handyman/Market Supervisor	TH2017

Personal Details					
Surname:	Forename(s):				
Address:	Telephone (home):				
Postcode:	Telephone (work): Telephone (mobile):				
	E-mail:				
	Discretion will be used when contacting you, but if you prefer not to be contacted on one of the above numbers, please withhold it				

Canvassing of any Member or Officer of the Council, directly or indirectly, for any appointment at the Council shall disqualify the candidate concerned for that appointment.

Please state below whether you know or are related to any councillor or employee of the Council. (Failure to disclose any relationship which is known to you will disqualify you for appointment, and if appointed will render you liable to dismissal without notice).

Declaration

Please ensure that you have read and understood the following statements.

By submitting this form, you confirm that you understand that any information given on this form, and associated recruitment forms including the equal opportunities monitoring form and rehabilitation of offenders and pre-employment medical form, which may be completed at a later date, may be verified with my referees and other appropriate external bodies and hereby give my explicit consent to this and the release of any documents from a third party. I declare that all of the information I provide will be correct and I understand that if I have given misleading information any subsequent job offer may be withdrawn or I may be dismissed from any appointment which has been made.

By submitting this form, you confirm that you have read the data protection and confidentiality statement and consent to my personal information being processed and stored by the Council.

Referees					
Please name two referees who may be approached, at least one of whom <u>must</u> be your present, or most recent employer. School and college leavers should give a teacher or tutor as one referee. Please ensure that your referees are in a position to provide a written response promptly. If you prefer either or both of your referees to not be contacted before a job offer is made, please indicate in the appropriate box. Any offer of employment will be subject to the receipt by the council of two satisfactory references.					
Name:	Name:				
Address:	Address:				
Telephone:	Telephone:				
E-mail address (preferred):	E-mail address (preferred):				
Occupation/Relationship to you:	Occupation/Relationship to you:				
☐ Please mark here if this referee should not be contacted before an offer is made	☐ Please mark here if this referee should not be contacted before an offer is made				

Application for the post of:	Job reference number:	Applicant Number (HR use only)

Education and Training
Secondary schools and further/higher education institutions attended (please state if full or part-time):
Examinations taken with level (e.g. GCSE) and result/grade:
Continue on a separate sheet if necessary
Details of professional or other relevant qualifications (including examinations taken, with results and grades):
Dotaile of professional of other relevant qualifications (morading examinations taken, with results and grades).
Current membership of professional bodies (please give level of membership if relevant):
Details of any relevant training courses, including date and course duration:
Continue on a separate sheet if necessary

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		include voluntary and work expemployed, leave this section bl		employment')				
Job title:			Date started:					
Employer:			Salary/Grade:					
Address:			Other benefits:					
			Notice period:					
Business:			Reason for leaving:					
Please give	Please give a brief description of your duties:							
(most recer	Previous Employment - include voluntary and work experience in this section (most recent first and including previous posts with present employer). Please give details relating to any gaps in your employment history. From: To: Name and business of employer: Post: Grade or final salary: leaving:							

Further information in support of your application
This section allows you to demonstrate your suitability for the post using examples to highlight cores skills and competences relating to your application. Your statement should include how your skills, experience and personal attributes would enable you to undertake the role. It is essential that you write this statement carefully and demonstrate which of the essential (minimum) and desirable qualities listed in the person specification you fill. You should include any activities or interests which you undertake outside of work which are relevant, but be careful not to focus on information which is not relevant. Please also indicate any particular reasons you have for applying for this post.

Additional Information				
If you have any final comments on the information that you have provided, please add them below.				
Please include any dates and times that you would be unavailable for interview.				

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Equal Opportunities Monitoring For

Watton Town Council is wholeheartedly committed to supporting equal opportunities in employment and opposes all forms of unlawful or unfair discrimination.

The information provided on this form will be used for equal opportunities monitoring purposes and to monitor the effectiveness of our equal opportunities policy. If you choose to complete this form, you consent to the information being used for equal opportunities monitoring. Any information provided will only be used for this purpose, will form no part of the selection process and will be treated in strict confidence.

Name: Position Applied for: Date of Birth:		
Sex (please select): Male F	Female	
proposing to undergo, is undergoing o	the protected characteristic of gender reassignment if the process that undergone a process (or part of a process) for the puring physiological or other attributes of sex.	
Please indicate here whether you are	subject to Gender Reassignment as defined above: Yes	No l
Please specify that statement that y	ou feel best describes your race or ethnicity?	
Marital or civil status:		
Married Single Divorced Civ	vil Partnership Other Prefer not to state	
Other (please specify)		
Which of the following best describ	es your religion or belief?	
Christian Buddhist Hindu J	ewish Muslim Sikh None Prefer not to state	
Other (please specify)		
Which of the following best describ	es your sexual orientation?	
Bi-sexual Gay Heterosexual	Lesbian Other Prefer not to disclose	
	ality Act 2010 a disability is considered as an impairment whe physical or mental, or may relate to a progressive illness/co	
Please indicate here whether you cons	sider yourself to be disabled as defined above: Yes N	No 🗌
If yes, what is the nature of your disab	ility?	
If yes, do you require any adjustments	to be made in order to support your attendance of an interv	view?