A close up of a sign

Description automatically generatedSaxmundham Town Council

**Application Form**

**Personal details**

|  |  |
| --- | --- |
| **Family name** |  |
| **First name** |  |
| **Home address** |  |
|  |  |
|  |  |
| **Telephone – day/evening** |  |
| **Email address** |  |
| **Do you have a full current driving licence?** |  |
| **Do you have a car available for work?** |  |

**Education** (*Start with most recent)*

|  |  |  |
| --- | --- | --- |
| **Date** | **Qualification gained** | **Grade obtained** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Training & Professional Qualifications** *(Start with most recent)*

|  |  |  |
| --- | --- | --- |
| **Date** | **Course title/Qualification** | **Duration** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Membership of Professional Bodies**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| **Present Employment** *(If you are currently unemployed please leave blank)* |

|  |  |  |
| --- | --- | --- |
| **Job title** |  | |
| **Basic pay/grade** |  | |
| **Employer’s name & address** |  | |
|  |  | |
|  |  | |
| **Telephone number** |  | |
| **Date started** |  | |
| **Period of notice required** |  | |
| **Main Duties & Responsibilities** | |

**Previous Employment**

|  |  |  |  |
| --- | --- | --- | --- |
| **Job Title** | **Employer** | **Dates employed** | **Reason for Leaving** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| **Further Details** |

Please tell us why you think you are a suitable candidate for this position, including relevant experience (voluntary or work), skills, abilities and any specialist knowledge you have. Make sure you refer to the criteria in the Job Description/Person specification.

|  |
| --- |
|  |

|  |
| --- |
| Are there any restrictions on your employment, e.g. do you require a work permit? **Y / N**    If you answered yes, please supply details on a separate sheet of paper. |

|  |
| --- |
| In accordance with the Rehabilitation of Offenders Act 1974, please give details of any criminal convictions, which may be relative to your application. |

|  |
| --- |
| To your knowledge, are you related to any member or employee of the Council?  **Y / N**    If yes, please provide details  **NB: Failure to disclose such a relationship and/or canvassing will disqualify from appointment.** |

**References**

Please give details of two referees whom we may ask about your suitability for the job. One of these must be your current or most recent employer. You should not name a relative as a referee. References will usually only be taken up if you are selected for interview.

|  |  |  |
| --- | --- | --- |
| **Name** | **Referee 1** | **Referee 2** |
| **Address** |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Telephone number** |  |  |
| **Email** |  |  |
| **How long have they known you / In what capacity?** |  |  |
| **May we contact this referee without asking you?** |  |  |

**We will not confirm an offer of appointment until we have received a satisfactory reference from your present or most recent employer.**

Please indicate the source of where you heard about the opportunity \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| I certify that to the best of my knowledge the details provided on this form and all other supporting papers are true and correct. I understand that if I have provided false or misleading information, this will result in the termination of any contract of employment, or the withdrawal of any offer of employment. I also hereby give my explicit consent to the processing of data contained or referred to on this form, in accordance with the Data Protection Act 1998 and any subsequent legislation.  Signature of Applicant ……………………………………...................…. Date …………………… |

**Please return this form by 14th October 2021 to:**

**Roz Barnett**

**Town Clerk**

**Saxmundham Town Council**

**The Old Police Station**

**Station Approach**

**Saxmundham, Suffolk**

**IP17 1BW**

**Or email to** [**townclerk@saxmundham-tc.gov.uk**](mailto:townclerk@saxmundham-tc.gov.uk)