**STURMINSTER NEWTON TOWN COUNCIL**

Job Application Form – Finance/Admin Assistant

CONFIDENTIAL

PLEASE USE **BLOCK CAPITALS** AND CONTINUE ON SEPARATE SHEET(S)

IF SPACE IS INADEQUATE

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| PERSONAL DETAILS  Forename(s): Surname:  Address:  Postcode:  Telephone: Mobile:  Email address:  How did you learn of this vacancy? |

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| EDUCATION DETAILS  Please give details of all secondary education including examinations taken (with results).  **Schools / Colleges** **Courses / Exams** **Qualifications / Grades obtained Date**  State any other achievements during education:  *Please be prepared to provide certificates of pass. etc.* |

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| FURTHER/HIGHER EDUCATION DETAILS  Please give details of any university course or other further education undertaken (including youth training, technical courses, vocational studies, correspondence courses, etc.)  **University / FE College** **Courses / Exams** **Qualifications obtained Grade Date**  Please give details of any training course undertaken or vocational qualification held that may be relevant to the role (for example, first aid training, fire safety training, etc.)  **Description**  **Provider/certifier** **Date undertaken/obtained**  *Please be prepared to provide certificates of pass. etc.* |

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| PUBLIC OR VOLUNTARY COMMITMENTS  Please give details of membership of any public or voluntary body and indicate the approximate time commitment entailed. |

EMPLOYMENT DETAILS

Please give details of relevant previous employment / key duties and responsibilities that might help us assess your suitability for the job for which you are applying, starting with the most recent employment and working backwards.

CURRENT/MOST RECENT EMPLOYER

Name:

Address:

Postcode:

Email

Position held:

Date started:

Notice period:

Current salary:

Outline of duties/responsibilities

Reason for leaving:

Does your current contract of employment contain any restrictions that prevent you from competing with your current employer or soliciting its customers after you have left?

YES NO

*If* ***YES*** *please supply a copy of your contract of employment*

PREVIOUS EMPLOYER (1)

Name:

Address:

Postcode: Telephone:

Position(s) held: Date from - to:

Salary:

Outline of duties/responsibilities:

Reason for leaving:

PREVIOUS EMPLOYER (2)

Name:

Address:

Postcode: Telephone:

Position(s) held: Date from - to:

Salary:

Outline of duties/responsibilities:

Reason for leaving:

DESCRIBING YOU

Please read the Job Description and tell us what skills, experience and personal qualities you have to enable you to work successfully in this role (use additional sheets if necessary).

INTERESTS, HOBBIES AND SPORTS

Please give details of all your spare time interests and hobbies including details of membership of bodies, committees, voluntary work and so on.

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| RIGHT TO WORK IN THE UK  Are you legally entitled to work in the UK? YES NO  We will require evidence of this prior to commencing employment  Please provide your National Insurance No. |
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| CRIMINAL RECORD  Have you ever been convicted of a criminal offence? YES NO  Declaration subject to the Rehabilitation of Offenders Act 1974  **If YES**, please give details:    **REFERENCES**  Please give two references, both of who should be able to comment on your suitability for the post (one should be your present/most recent employer)  Name:  Address  Postcode Telephone  Email  Why is this person your referee?  Can we contact them prior to interview YES NO  Name:  Address  Postcode Telephone  Email  Why is this person your referee?  Can we contact them prior to interview YES NO |
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| DRIVING LICENCE  ***Please delete as appropriate:***  Do you have a current valid driving licence? YES NO  If you have a driving licence is it: PROVISIONAL FULL HGV  *We will require evidence of this prior to commencing employment* |

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| HEALTH  Do you require any reasonable adjustments or auxiliary aid(s) for the interview and selection process? YES NO  Do you suffer from any disability\* (a physical or mental impairment that has a long term and substantial effect on your ability to carry out day to day activities) and/or medical condition which will affect your ability to carry out the main duties of the job for which you are applying (see attached job description/specification)? YES NO  *This information will help us to identify reasonable adjustments that we might need to make to arrangements/premises in order to accommodate you. We are an equal opportunities employer and will not discriminate on the grounds of disability.*  *If* ***YES****, please give details:* |
| **UNDERTAKING**  Please read and sign the following undertaking: I confirm that the information I have given on this application form is, to the best of my knowledge and belief, true in all respects. I understand that, should I have deliberately made a false or misleading statement on this form my future employment can be terminated without notice.  Signed Date  Note: We are an equal opportunities employer and will not tolerate discrimination in any form. |

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| DATA PROTECTION  The Data Protection Act 1998 (“the Act”) sets out certain requirements for the protection of your personal information against unauthorised use or disclosure. The Act also gives you certain rights. Except to the extent we are required or permitted by law, the information which you provide in this application form and any other information obtained or provided during the course of your application (“the information”) will be used solely for the purpose of assessing your application. If your application is unsuccessful or you choose not to accept any offer of employment we make, the information will not be held for longer than is necessary, after which time it will be destroyed, although relevant information will be retained in the longer term to facilitate our equal opportunity monitoring. If your application is successful, the information will form part of your employment file and we will be entitled to process it for all purposes in connection with your employment. So that we may use the information for the above purposes and on the above terms, we are required under the Act to obtain your explicit consent. Accordingly, please sign the consent section below.  I CONSENT TO MY PERSONAL INFORMATION BEING USED FOR THE PURPOSES AND ON THE TERMS SET OUT ABOVE.  Signed Date |