**Calne Without Parish Council**

**Job Application Form**

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| **Post Applied For** | **Clerk** |  |  |
| **Closing Date** | **21st May 2021** | **Interview Date** | **June 2021** |

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| Please complete this form fully, preferably in Microsoft word, otherwise in black ink or type then print, sign, scan and email the completed form to clerk@calnewithout-pc.gov.uk . CV’s must be submitted together with the completed application. Applications received after the closing date will not normally be considered. |
| IINFORMATON SUPPLIED ON THIS FORM WILL BE TREATED IN CONFIDENCE |

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| **Section 1** | **Personal details** |
| Last name |       | First Name |       |

|  |  |
| --- | --- |
| Address |       |
|  |       |
|  |       |
|  |       |
| Postcode |       |

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| --- | --- | --- | --- |
| Home Phone |       | National Insurance No. |       |

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| --- | --- |
| Daytime Phone |       |
| Mobile Phone |       |
| Email address |       |

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| --- | --- | --- | --- | --- |
| Can we contact you at work | Yes | [ ]  | No | [ ]  |
| Are you free to remain and take up employment in the UK with no current immigration restrictions? | Yes | [ ]  | No | [ ]  |
| Driving LicenceDo you hold a full clean driving licence valid in the UK | Yes | [ ]  | No | [ ]  |

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| If you are successful, you will be required to provide relevant evidence of the above details prior to your appointment |

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| If shortlisted for interview, please give any days/dates when you would not be able to available |  |

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| **Section 2** | **Present Employment** |
| Present or last employment (if unemployed give details of last employer) |

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| --- | --- |
| Name of Employer |  |
| Address |  |
|  |  |
|  |  |
| Postcode |  |
| Post Title |  |
| Date of appointment |  |
| Salary |  |
| Brief description of duties |

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| Period of Notice |  | **Last day of service** |  |
| Reason for leaving(if no longer employed) |  |

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| **Section 3** | **Previous Employment** |
| Previous employment (Most recent first)Please cover the last 5 years |

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| Name of Employer |       |
| Address |       |
|  |       |
|  |       |
| Postcode |       |
| Position Held |       |
| Summary of duties |
|       |
| Reason for leaving      |

|  |  |
| --- | --- |
| Name of Employer |       |
| Address |       |
|  |       |
|  |       |
| Postcode |       |
| Position Held |       |
| Summary of duties |       |
|  |
| Reason for leaving |       |

|  |  |
| --- | --- |
| Name of Employer |       |
| Address |       |
|  |       |
|  |       |
| Postcode |       |
| Position Held |       |
| Summary of duties |
|       |
| Reason for leaving |       |

|  |  |
| --- | --- |
| Name of Employer |       |
| Address |       |
|  |       |
|  |       |
| Postcode |       |
| Position Held |       |
| Summary of duties |
|       |
| Reason for leaving |       |

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| Continue on a separate sheet if necessary |

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| **Section 4** |  **Education** |
| Please provide qualifications obtained from Schools colleges and Universities. For GCSE’s or equivalent indicate the number of passes. Please list highest qualification first |

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| College or University | Course | Qualification and grades obtained |
|       |       |       |
| School | Subjects | Qualifications and grades obtained |
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| Continue on a separate sheet if necessary |

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| Professional or Technical Qualification |
| Please give details |

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| Professional/Technical qualifications | Course details |
|       |       |
| Membership of professional or technical associations:      |
| Continue on a separate sheet if necessary |  |

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| **Section 5** | **Training and Development** |
| Please give details of any training and development courses or non-qualification courses which support your application. |

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| Title of Training programme or course | Date | Qualification if appropriate |
|       |       |       |
| Continue on a separate sheet if necessary |

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| **Section 6** | **Personal Statement** |
| **Abilities, skills, knowledge and experience.****If you have been involved in voluntary/ unpaid activities, please also include this information. Continue on a separate sheet if necessary** |

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| **Section 7** | **Rehabilitation of Offenders Act (1974)** |

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| Do you have any convictions that are unspent under the Rehabilitation of Offenders Act 1974 or as amended by the Legal Aid Sentencing and Punishment of Offenders Act 2012 | **Yes** | **[ ]**  | **No** | **[ ]**  |

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| If yes, please give details / dates of offence(s) and sentence |
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| **Section 8** | **Disability Discrimination Act** |
| This Act protects people with disabilities from unlawful discrimination. We actively encourage applications from people with disabilities. The Disability Discrimination Act defines a disabled person as someone who has a physical or mental impairment which has a substantial and adverse long-term effect on his or her ability to carry out normal day to day activities |

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| Do you have a disability which is relevant to your application? | **Yes** | **[ ]**  | **No** | **[ ]**  |

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| If yes, please give details:      |

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| **Section 9** | **References** |

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| Please give the names and addresses of your two most recent employers if applicable. If you are unable to do this, please indicate your relationship to your references in the Work Relationship field. |

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| **Reference 1** | **Reference 2** |

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| --- | --- | --- | --- |
| Name |       | Name |  |
| Position |       | Position |  |
| Work relationship |       | Work relationship |  |
| Organisation |       | Organisation |  |
| Address |       | Address |  |
|  |       |  |  |
|  |       |  |  |
| Postcode |       | Postcode |  |
| Telephone No. |       | Telephone No |  |
| Email address |       | Email address |  |

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| Are you willing for this referee to be approached prior to interview? | **Yes** | **[ ]**  | **No** | **[ ]**  | Are you willing for this referee to be approached prior to interview? | **Yes** | **[ ]**  | **No** | **[ ]**  |

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| **Sickness absence** |  |
| How many days have you taken within the last 24 months? |       |
| Please give reasons      |

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| **Section 10** | **Declaration** |

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| **Relatives/Other interests**Any candidate who directly or indirectly canvasses a Councillor or employee of the Council will be disqualified from consideration for the job. The Council does not bind itself to appoint any applicant. |

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| Are you related to or do you have a close personal relationship with a Councillor(s) or employee of Calne Without Parish Council | Yes | [ ]  | No | **[ ]**  |

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| If yes specify name(s), position(s) and relationship(s) |  |

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| If appointed, do you have any interests or hold any appointments that may conflict with employment by the Council in the role for which you have applied?If yes, please detail on a separate sheet | Yes | **[ ]**  | No | **[ ]**  |

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| **Statement to be signed by the Applicant**The Council is committed to an anti-fraud culture and participates in statutory anti-fraud initiative.Please complete the following declaration and sign it in the appropriate place below. If this declaration is not completed and signed your application will not be considered.I acknowledge that the Council is under a duty to protect the public funds it administers and to this end I agree it may use information provided on this form for the prevention and detection of crime and it may share this information with other bodies solely for these purposes. I hereby agree that the information given on this form may be used for data registration purposes.I hereby certify that:* All the information given by me on this form is correct to the best of my knowledge
* All questions relating to me have been accurately and fully answered
* I possess all the qualifications which I claim to hold
* I have read and if appointed, am prepared to accept the conditions set out in the conditions of employment and the job description.
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| **Signed:** |  | **Date** |  |

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| Calne Without Parish Council will communicate with applicants via the email address supplied in Section 1 so please make sure this is correct and supply at least 1 phone number.Calne Without Parish Council undertakes that it will treat any personal information that you provide to us or we obtain from you in accordance with the requirements of the GDPR and Data protection Act 1998. |

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| **Returning this form** |
| **Please fill in the form then print, sign, scan and email to:****clerk@calnewithout-pc.gov.uk**If you have any problems filling in this form, please contact Calne Without Parish Council via the email address above. |