**Job Application Form**

**Please call 01872 323 800 if you have any questions on how to complete this form or if you require it in a different format or language.**

Please fill in **all** **sections** of the form using **black ink**/type. The information you provide will help us make a fair decision in the selection process.

|  |  |  |  |
| --- | --- | --- | --- |
| **About the role** | |  | |
| Role applied for: |  | Ref no: |  |
| Directorate: |  | Location: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **About you** |  | | |
| Title: |  | Surname: |  |
| First name(s): |  | | |
| Home address: |  | Home phone: |  |
| Work phone: |  |
| Mobile: |  |
| Postcode: |  | Email: |  |
| NI Number: |  | (You can get this from the Department of Work and  Pensions) | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Your current or most recent employment** | | | |
| **Note:**  If you are applying for your first job, please provide any voluntary work/work experience in the “Previous employment or experience” section. | | | |
| Employer name: |  | Job title: |  |
| Employer address: |  | Salary: |  |
| Start date: |  |
| Leave date: (if applicable) |  |
| Reason for leaving: |  | | |
| Main duties and responsibilities: |  | | |

|  |  |  |
| --- | --- | --- |
| **Other training, courses and self development** | |  |
| Name of provider/college | Title of course/training, e.g. First Aid at Work | Qualification (if relevant) |
|  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Previous employment or experience** | | | | |
| Start with the most recent first and work backwards. You must explain any gaps in your work history since you left education (e.g. unemployment; career breaks; voluntary work; travel etc). | | | | |
| Dates (mm/yy) | | Employer  **or**  Reason for gap | Job title, duties and responsibilities | Reason for leaving |
| From | To |
|  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Qualifications achieved from secondary, higher and further education** | | | |
| Type of qualification  (GCSE, NVQ, Degree etc) | Subject title of qualification | Grade | Date achieved (dd/mm/yy) |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Membership of professional bodies** | |  |  |
| Institute or association | Membership level | How obtained, e.g. through qualification or election | Date achieved (mm/yy) |
|  |  |  |  |

|  |
| --- |
| **Your supporting statement** |
| This important part of your application will be used to decide if you meet the criteria and should be shortlisted for interview. Refer to the role information supplied and tell us how your skills and experience match. Use examples where possible and provide the situation or task, your action(s) and the result.  If you are applying for your first job, provide examples of other relevant experience that will help us decide your suitability, e.g. gained through education, the community etc. |
|  |
|  |

|  |
| --- |
| **Interview requirements** |
| We will make reasonable adjustments to help a person with disabilities through the application and selection process. If you have specific requirements for attending an interview, please let us know: |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| **References** | | | |
| If you have any concerns, please call 01872 324134. Please provide 2 references. Do not use friends or relatives. | | | |
| **Reference 1**: This **must** be your current or most recent employer or, if you do not have any previous employment, your most recent tutor (school, college or university). | | **Reference 2**: A reference of your choice. | |
| Full name: |  | Full name: |  |
| Job title: |  | Job title: |  |
| Employer: |  | Employer: |  |
| Address: |  | Address: |  |
| Postcode: |  | Postcode: |  |
| Email: |  | Email: |  |
| Relationship to you: |  | Relationship to you: |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Declaration of criminal convictions** | | | | |
| Have you ever been convicted of any criminal offence, which is not treated as spent under the Rehabilitation of Offenders Act 1974 or do you have any charges pending? | | | | Yes/No |
| If yes, please provide details: | | | | |
| I accept that if any of the information is found to be false or misleading I will be disqualified from appointment. | | | | |
| **Signature:** |  | **Date:** |  | |

|  |
| --- |
| **Disclosure of interest** |
| Have you ever received a redundancy payment or pension from a local authority? Yes/No If yes, please give details including month and year: |
| Are there any restrictions to you living and working in the UK which might affect your Yes/No right to work for us (e.g. needing a work permit/visa)?  If yes, please provide details: |
| The role information supplied will say if this post requires travel and, if so, if you need access to transport and/or a full current UK driving licence.  If needed, do you have access to transport? Yes/No  If needed, do you have a full current UK driving licence? Yes/No |
| The Working Time Regulations (1998) require us to check the hours worked by Yes/No employees. Would this role be your only employment?  If no, please provide details of your other role(s) and the days and hours you work: |
| Canvassing of our Councillors and employees (asking them to help you get this role), directly or indirectly, for any appointment will disqualify your application. Also, if you fail to declare any relationship with a Councillor or employee of Cornwall Council your application may be disqualified and, if appointed, you may be dismissed without notice. |
| Are you related to, or have you formed any relationship (personal, financial or  professional) with any current Councillor or employee of Cornwall Council, or School Yes/No Governor?  If yes, please give details: |
| Do you, your partner or family have any interests (personal, financial or professional) Yes/No that may conflict with you doing this role?  If yes, please give details: |
| Have you ever been the subject of a formal disciplinary procedure? Have you ever Yes/No been dismissed from any previous employment?  If yes, please give details: |

|  |
| --- |
| **How we protect your personal information** |
| We keep on file information from this application form, equal opportunities form and any documents you attach. This is required for recruitment and equal opportunities monitoring purposes, the payment of staff and the prevention and detection of fraud. All information will be dealt with in accordance with data protection legislation and will not be sold to any third party. Unsuccessful application forms will be destroyed after 6 months; anonymised data will be kept for monitoring purposes |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Your declaration** | | | | | | |
| I understand that any employment, if offered, will be subject to the information on this form being correct and I confirm that no valid information has been wilfully withheld. I understand that if I am appointed, I am liable to dismissal without notice if the information on this form is later proved to be inaccurate. | | | | | | |
| **Signature** (applicant): | |  | | **Date:** | |  |
| Please sign and date if you are returning the form by post. If returning by email, you will be asked to sign a copy before any offer of employment is made. | | | | | | |
| If you have completed this form on behalf of the applicant, please add your details: | | | | | | |
| Name (printed): |  | | Contact number: | |  | |

**Thank you** for taking the time and effort to complete this application form. The role information supplied will say where it should be returned.

**Please make sure you complete our equal opportunities monitoring form.**