# EMPLOYMENT APPLICATION FORM

|  |  |
| --- | --- |
| Position applied for: |  |
| Vacancy Reference: |  |

## PERSONAL DETAILS

|  |  |
| --- | --- |
| Title: |  |
| Surname: |  |
| First Name(s): |  |
| Previous Names(s): |  |
| Address: |  |
| Preferred Telephone contact(s): |  |
| Email address: |  |

## EDUCATION AND QUALIFICATIONS

|  |  |
| --- | --- |
| Name of School/college/university: |  |
| Qualifications and Grades: |  |
| Date Attained: |  |
| Attended from: |  |
| Attended to: |  |

*Please copy and paste to continue inputting all your Education and Qualification details*

## TRAINING AND MEMBERSHIPS

|  |  |
| --- | --- |
| Name: |  |
| Membership/Grade: |  |
| Date Joined/attained: |  |
| Examination taken?: |  |

*Please copy and paste to continue inputting all your Training and Membership details*

## EMPLOYMENT HISTORY

|  |  |
| --- | --- |
| Start date: |  |
| Is this your current job:  |  |
| End date: |  |
| Notice Period: |  |
| Employers name: |  |
| Address: |  |
| Job Title: |  |
| Duties and Responsibilities: |  |
| Reason for leaving: |  |

*Please copy and paste to continue inputting all your Employment History details*

## SUPPORTING INFORMATION

|  |
| --- |
| Please describe experience relevant to this application. Include expertise gained both in and outside paid employment: e.g. your current or any other job, voluntary work, leisure interest, domestic work, study, etc. Please continue on a separate sheet if necessary. **Information provided in this part of your application should demonstrate how you meet the Person Specification for the post.** |

## REFERENCES

Please provide details of two referees who know you well enough to comment on your ability to do the job. One must be your current or most recent employer if you have been employed. Referees must not be members of your family.

|  |  |
| --- | --- |
| **Current or most recent employer** |  |
| Name: |  |
| Position Held: |  |
| Name of Organisation: |  |
| Email address: |  |
| Telephone number: |  |
| Address: |  |
| Capacity known: |  |

|  |  |
| --- | --- |
| **Second reference** |  |
| Name: |  |
| Position Held: |  |
| Name of Organisation: |  |
| Email address: |  |
| Telephone number: |  |
| Address: |  |
| Capacity known: |  |

## DRIVING LICENCE

|  |  |
| --- | --- |
| Do you hold a full UK driving licence? |  |
| Please give details of any endorsements: |  |

## FILTER QUESTIONS

|  |  |
| --- | --- |
| Do you have the right to work in the UK? |  |
| Have you ever lived at any address in the Eastbourne Borough or Lewes District boundaries? If yes, please provide the address/es and approximate dates of residence. |  |
| Are you aware of any monies owed by yourself to either Eastbourne Borough or Lewes District Council? If yes, please provide the details of what it is in respect of (for example Council Tax, Overpaid Housing Benefit) and if you have a payment plan in place for repayment please provide the reference number. The Council’s Code of Conduct states that we view failure to pay any money due to itself as likely to bring the council’s own reputation into disrepute. It is for the council to demonstrate an individual’s liability for any payment, and to institute recovery procedures. But any persistent failure to pay a legitimate demand presented in this connection will be dealt with within the framework of our agreed Disciplinary Procedure. All information gathered is treated in accordance with the Councils privacy notice. |  |

## OTHER DETAILS

|  |  |
| --- | --- |
| When are you available for an interview. | *Please select from:*Morning preferableAfternoon preferableAny |
| Please state any date(s) when you would be UNABLE to attend an interview. If you are invited for an interview, please give details of any special arrangements that you require |  |

## CRIMINAL CONVICTIONS

Under the Rehabilitation of Offenders Act 1974 (Exceptions) order 1975 (as amended in 2013) Guidance and criteria on the filtering of these cautions and convictions can be found on the Disclosure & Barring Service Website [www.gov.uk/organisations/disclosure-and-barring-service](http://www.gov.uk/organisations/disclosure-and-barring-service)

|  |  |
| --- | --- |
| Have you ever been convicted of a criminal offence in the past which has not become “spent” under the Rehabilitation of Offenders Act 1974? | YES / NO |
| Are you subject to pending criminal prosecution or proceedings? | YES / NO |
| Please give details of the nature of any “unspent” convictions or pending criminal convictions or pending criminal proceeding (not including minor traffic offences). If you are in doubt about your answer to the above question(s), ensure that you obtain clarification of your circumstances before making an application. |  |

The Council reserves the right to make a criminal record check in respect of job applications for appointment, or registration involving substantial access to children.

## DECLARATION

|  |  |
| --- | --- |
| By signing this form I declare that all the information set out in this application form is true in all respects and I understand that false information may render me liable for dismissal if I am appointed. | Signature:Date: |
| By signing this form and submitting this form I consent to processing sensitive personal l data relating to me for the purpose of managing my application, provided that such processing is in accordance with the Data Protection Act 2018. | Signature:Date: |

## RECRUITMENT/EQUALITIES MONITORING FORM

|  |  |
| --- | --- |
| Position applied for: |  |
| Vacancy Reference: |  |

## DISABILITY DISCRIMINATION ACT

|  |  |
| --- | --- |
| Do you consider yourself to have a disability? | YES / NO |

## DIVERSITY MONITORING

To help us ensure that our equal opportunities policy is fully implemented please complete this section or the monitoring form. The information provided is kept separately from the remainder of your application and is not seen by anyone involved in short listing either during or after the recruitment process.

|  |  |
| --- | --- |
| **Age group:**  | *Please select from:*16-2021-2526-3536-4546-5556-5960 and over |

|  |  |
| --- | --- |
| **Gender:** | *Please select from:*Prefer not to sayMaleFemale |

|  |  |
| --- | --- |
| **Ethnic Origin:** | *Please select from:*Asian / Asian BritishBlack / Black BritishChineseOtherWhiteMixedPrefer not to sayArab |

|  |  |
| --- | --- |
| **Religion:** | *Please select from:*BuddhistChristianHinduJewishMuslimSikhNo ReligionOtherPrefer not to say |

|  |  |
| --- | --- |
| **Sexual Orientation:** | *Please select from:*Bi/BisexualGay ManHeterosexual/StraightPrefer not to sayGay woman/Lesbian |

**Please return your completed application form to** recruitment@lewes-eastbourne.gov.uk