



EMPLOYMENT APPLICATION FORM

(Please complete and print all sections in black ink, single sided)

Job Applied For

Personal

Preferred Title Surname

Forenames Preferred Name

Home Address

National insurance number Do you have a current driving licence?

Daytime telephone number May we contact you there?

Evening telephone number May we contact you there?

Mobile telephone number E-mail address

Have you previously been employed by Middlewich Town Council?

If yes, in what position and when?

Are you related to anyone connected with Middlewich Town Council (including Councillors or Officers)?
"Related to" is not limited to blood relatives or marriage, but any form of close relationship, including co-habitation.
If yes please give full details on a separate sheet and send with your application.

ASYLUM AND IMMIGRATION ACT 1996
Do you have permission to work in the UK?
You may be asked to supply evidence

Most Recent Employment

Current (or most recent) Employer's Name

Address

Job Title

From

To

Notice Period

Salary/Hourly Rate/Benefits

Please give a brief description of your main duties and responsibilities including your reasons for looking for another job.

Previous Employment (most recent first)

Name & Address of Employer

From

To

Job Title, Main Duties and Reason for Leaving

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Skills, Abilities and Experience

Please tell us about any skills, abilities and experience you consider to be relevant to this position taking care to relate to the person specification provided for this post.

Please attach extra sheets if you need to.

Education Including Professional Qualifications

Secondary School/College/University

From

To

Qualifications Achieved

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Membership of Professional Organisation or Trade Association

Please give details of any professional organisation or trade association of which you are a member including level of membership.

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Practical Training

Please list any training courses you have attended, especially courses relevant to the job for which you have applied.

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Hobbies, Interests and Voluntary Positions

Please give details of any hobbies, interests and voluntary positions held to help us understand more about you

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Health

Is there anything about your medical history or state of health that is relevant to this application?

Yes/No*

If yes, please give details. This information will be treated as confidential and will not necessarily preclude you from employment.

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How many days sickness have you had in the last 2 years?

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Rehabilitation of Offenders

The nature of the work involved in the position for which you are applying may bring you into contact with vulnerable people or information about vulnerable people. Therefore, it is exempt from Section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act (Exemptions Orders) 1975. This means that you are NOT entitled to withhold information relating to any convictions you may have had.

Do you have any convictions?

Yes/No*

If yes, please give full details on a separate sheet and send with the application. This information will be treated as confidential and will not necessarily preclude you from employment.

**Delete as applicable*

References

Please give the name and address of two referees, one of who should be your present or most recent employer. If you have not been employed please provide the name of someone who can comment on your suitability for this position. Referees should not normally be relatives or friends. If this does not cover a three year unbroken period, please supply further details of referees on a separate piece of paper.

Present or Last Employer		Previous Employer	
Name	<input type="text"/>	Name	<input type="text"/>
Address	<input type="text"/>	Address	<input type="text"/>
Telephone No.	<input type="text"/>	Telephone No.	<input type="text"/>
Position	<input type="text"/>	Position	<input type="text"/>

May we approach these referees without further reference to you?

Yes/No*

**Delete as applicable*

I declare that to my knowledge, the information on this application and submitted on any accompanying documents is full and correct. I understand that if I have given false or misleading information on this application, Middlewich Town Council may dismiss me if I am appointed. In accordance with the Data Protection Act 2018, as part of this application you give Middlewich Town Council permission to collect, retain and process information about you. This information will only be used so that we can monitor our compliance with the law and best practice in terms of equal opportunity and no-discrimination. If your application is unsuccessful it will be kept for 12 months and then confidentially destroyed. If you are employed by Middlewich Town Council, this application will be retained on your personal file for the duration of your employment.

Signed.....

Date.....

Applications can be sent via email or post:

Email: clerk@middlewich.org.uk

Post: Middlewich Town Council
Town Hall
Victoria Buildings
Middlewich
CW10 9AS