**Please complete this application form in black ink and block capitals or electronically**

Royston Town Council is an equal opportunities employer. The aims of the Equalities Policy are to ensure that no job applicant or employee receives less favourable treatment on the grounds of race, nationality, gender, sexual orientation, marital status, age, religion or any disability nor disadvantaged by conditions or requirements which cannot be shown to be justifiable.

|  |  |
| --- | --- |
| Role Applying For |  |
|  | |
| **PERSONAL DETAILS** | |
| Title |  |
| First Name(s) |  |
| Surname |  |
| Contact Address (please include the postcode) |  |
| Email Address |  |
| Mobile Number |  |
| Daytime Telephone Number |  |
| Evening Telephone Number |  |
| National Insurance Number |  |

**CRIMINAL CONVICTIONS**

Under the Rehabilitation of Offenders Act 1974, you are required to give details of any criminal convictions which are not “spent”. In addition, you are also required to disclose any cautions and binding over orders that you have received in the last twelve months. Failure to do so may render you liable to disciplinary action or dismissal.

Have you any convictions that are not spent under the Rehabilitation of Offenders Act? **YES/NO**

(If YES please attach further details)

Checks may be made with the Criminal Records Bureau if appointed.

**EMPLOYMENT HISTORY**

|  |  |
| --- | --- |
| **Present or Last Employer** | |
| Job Title |  |
| Employer |  |
| Address (please include the postcode) |  |
| Reason for Leaving |  |
| Date Started |  |
| Date Left or Notice Required if still employed |  |
| Key Roles and Responsibilities |  |

**PREVIOUS EMPLOYMENT, WORK EXPERIENCE OR VOLUNTARY WORK**

*(put most recent first and continue on additional sheets where necessary)*

|  |  |  |  |
| --- | --- | --- | --- |
| Dates  (From-To) | Name & address of employer | Job title & main duties | Reason for leaving |
|  |  |  |  |

**EDUCATION, QUALIFICATIONS AND TRAINING**

Please list your relevant qualifications in date order.

**SECONDARY EDUCATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Dates of study | | Examinations taken (or to be taken) and qualifications gained with grades | Date passed |
|  |  |  |  |

**HIGHER / FURTHER EDUCATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Dates of study | | Examinations taken (or to be taken) and qualifications gained with grades | Date passed |
|  |  |  |  |

**TRAINING COURSES / PROGRAMMES ATTENDED**

|  |  |
| --- | --- |
| Date(s) attended | Title of Course |
|  |  |

|  |
| --- |
| **EXPERIENCE, SKILLS AND OTHER INFORMATION TO SUPPORT YOUR APPLICATION**  **Please detail experience and skills which demonstrate your ability to carry out this job. Please continue on a separate sheet if necessary.** |
|  |

|  |  |  |
| --- | --- | --- |
| **GENERAL INFORMATION** | | |
| Do you have a current Driving Licence | Yes 🞎 | No 🞎 |
| Are you related to a Councillor or employee of Royston Town Council? | Yes 🞎 | No 🞎 |
| If so, please provide details of the name of the person and the relationship to you |  | |
| Please tell us how or where you heard about this job position |  | |

**DISABILITY**

The Disability Discrimination Act defines disability as a physical or mental impairment that has a substantial and long term adverse effect on the ability to carry out normal day-to-day activities. This includes anybody with progressive illnesses such as cancer (even if you have fully recovered).

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

If yes, please give brief details of your disability

Please indicate if you require any reasonable adjustments to be made to enable you to fully participate in the selection process (such as wheelchair access, sign language, interpreter etc.).

**REFERENCES**

Please give details of two people who are able to describe your suitability for this post. One should be your present or last employer unless you have not worked before. Do not include relatives or people with whom you live.

Name: Name:

Address: Address:

Tel: Tel:

E-Mail: E-Mail:

Position: Position:

How long have you known this referee and in what capacity? How long have you known this referee and in what capacity?

Please tick this box if you **do not** wish your referee Please tick this box if you **do not** wish your referee

to be contacted prior to interview to be contacted prior to interview

|  |  |
| --- | --- |
| **CONSENT AND DECLARATION OF DETAILS** | |
| By supplying this information, you consent to it being processed for all employment purposes as defined in Data Protection legislation and its use in any verification checks that may be made.  I am not subject to any immigration controls or restrictions which prohibit my undertaking work in the UK. (You will be requested to produce appropriate documentation at interview).  I declare that the information given on this form is true, complete and accurate. I understand that by deliberately giving false or incomplete answers, I will be disqualified from this post or, in the event of my appointment, may be dismissed without notice. | |
| Signature |  |
| Date |  |
| CV’s alone will not be accepted. | |

Please return this form and supporting documents to:

The Town Clerk, Royston Town Council, Town Hall, Melbourn Street, Royston, Herts. SG8 7DA

Or by email to: town.clerk@roystontowncouncil.gov.uk