

SHILDON TOWN COUNCIL

APPLICATION FORM

1 Post Details
Post applied for : Administration Assistant
Where did you see this post advertised :

2. Personal Details

Surname :	Other names :
Title :	
Address :	Home telephone no. Mobile No. E-mail address:
Post Code :	N.I. Number

3 References

Details of two referees are required, one of which should be from your present or most recent employer. Next of kin or immediate relatives should not be named as referees. It is normal to take up references before an interview and therefore if you have any strong objection to either reference being sought at this stage, please indicate yes/no

Name :	Name :
Address :	Address :
Post Code	Post Code
Telephone No.	Telephone No.
E-mail	E-mail
Title/Position :	Title/Position :
Relationship to applicant :	Relationship to applicant :
N.B. Appointment will only be confirmed subject to satisfactory references	

4 Interview arrangements

Please indicate below any dates when you will not be available to attend for interview :

5 Disability

Do you consider yourself to have a disability that you would like us to be aware of this stage in the application process. This may include a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities.

Yes No Prefer not to say

If answered yes, please detail any specific requirements to assist you with an interview and we will try to make the necessary arrangements.

6 Qualifications

Qualifications obtained	Grade	Date achieved	School/College/University

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7 Employment History			Please list current or most recent post first
Name and address of Employer	Post	Date From To	Reason for leaving

8 Summary of experience and skills

Please give details of your experience and skills relevant to this post in support of your application

Please continue on a separate sheet if required

9 Relationships

Are you related to any elected member/employee of Shildon Town Council

Yes/No

If yes, please provide details

10 Convictions

Do you have any criminal convictions, cautions, reprimands or final warnings that are not 'protected' as defined by the Rehabilitation of Offenders Act 1974.

Yes/No

If Yes, please provide relevant details of the offence, date of offence and sentence below:

The Council is committed to confidentiality and complies with the Data Protection Act 1998. All information will be handled and stored sensitively and used only for its intended purpose.

11 Declaration

I declare that all of the information submitted on this application form is true, that I have not canvassed an elected Member/employee of the Town Council, either directly or indirectly, in connection with this application and I will not do so. I understand that such canvassing will disqualify me as a candidate for this post.

Signature :

Date :

Please return to : Shildon Town Council, Council Offices, Civic Hall Square,
Shildon, County Durham. DL4 1AH

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Closing date: 11th February 2019 **Interview date:** 28th February, 2019

If you have not heard from us within 10 days of the closing date, please assume that your application has been unsuccessful.