

SHILDON TOWN COUNCIL

APPLICATION FORM

1 Post Details
Post applied for : Civic Hall Manager
Where did you see this post advertised :

2. Personal Details

Surname :	Forename(s) :
Title :	
Address :	Telephone No: Home
	Mobile:
	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. 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 below.

Name :	Name :
Address :	Address :
Telephone No :	Telephone No :
Email:	Email:
Title/Position :	Title/Position :
Relationship to applicant :	Relationship to applicant :

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 : Yes/No

6 Qualifications			
Qualifications obtained	Grade	Date achieved	School/College/University

7 Employment History			Please list current or most recent post first
Name and address of Employer	Post	Dates 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 give detail

10 Convictions

Do you have any criminal convictions : Yes/No

Please give details of any criminal convictions that you may have which are not excluded by the Rehabilitation of Offenders Act 1974.

Data Protection Statement

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. False information may render me liable for dismissal if I am appointed.

I agree to the above statement and will sign and date a copy of this application as a true record if I am invited to an interview.

Signature :	Date :
-------------	--------

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

Closing date : **20th February, 2018**

If you have not heard from us within 28 days of the closing date, please assume that your application has been unsuccessful.