



Rochford Parish Council

Job Application Form

Position Applied For _____

Section 1		Personal details	
Last Name:		First Name:	
Address:			
Post Code:			
Phone Number:			
Email address:			
What is the best time to contact you?			
Do you need a permit to work in the UK?			
When can you start work for the Council			

Parish Council Rooms
West Street
Rochford SS4 1AS
email: enquiries@rochfordparishcouncil.gov.uk
Phone: 01702 540722
Mobile: 07848 438408

Section 2 Information in support of your application.

Please include any skills experience and qualifications you have acquired that can support this application whether within the working environment or outside.

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Section 3 Your Qualifications

Please include all qualification and training (Degree, GCSE, short course etc)

Level	Subject/name of Course	Grade attained

Section 4 Membership of Professional Bodies

Name of Professional Body	Grade of Membership

Section 5 Employment History

List your previous employers in reverse order, starting with your current or last employer.

Employers name and address	Dates of employment	Job Title & main duties	Reason for leaving

Section 6 Rehabilitation of Offenders Act (1974)

This information will not be used as part of the shortlisting or interview criteria.

Do you have any convictions that are unspent under the Rehabilitation of Offenders Act (1974)

Yes or No

If yes, please give details:

Date(s):	Offence(s):	Sentence:

Section 7 Disability Discrimination Act

This Act protects people with disabilities from unlawful discrimination. The Act defines a disabled person as someone who has a physical or mental impairment which has a substantial and adverse long-term effect on his or her ability to carry out normal day to day activities.

Do you have a disability which is relevant to this application?

Yes or No

Do we need to make specific arrangements in order for you to attend the interview?

Yes or No

If yes, please give details on a separate sheet:

Section 8 References:

Please give the names and addresses of your two most recent employers (if applicable) or persons who are willing to provide references for you. They should have known you (but are not members of your family) for at least two years.

Reference 1:	Reference 2:
Name:	Name:
Address:	Address:
E-mail:	E-mail:
Telephone:	Telephone:
Relationship to you:	Relationship to you:

Section 9 Declaration

A. Relatives/Other Interests

Any candidate who directly or indirectly canvasses a Councillor or employee of the Council will be disqualified from consideration for the job. The Council does not bind itself to appoint any applicant.

Are you related to or do you have a close personal relationship with a Councillor(s) or employee(s) of the Council? Yes or No

If yes, specify name(s), position(s) and relationship(s)

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If appointed, do you have interests or hold any appointments which may conflict with this position? Yes or No
If yes, please detail on a separate sheet.

B. Statement to be signed by the applicant.

I certify that to the best of my knowledge the details provided on this form and all other supporting papers are true and correct. Furthermore, I understand that if I have provided false or misleading information in response to any questions or have failed to disclose information, this will result in the termination of any contract of employment entered into, or the withdrawal of any offer.

I also hereby give my explicit consent to the processing of data contained or referred to on this form, in accordance with the Data Protection Act 1988 and any subsequent legislation.

Signed:

Dated:

