**Patchway Town Council**

**APPLICATION FOR EMPLOYMENT**

Completed Application Forms & covering letter detailing how your skills match the role must be returned by: NOON on 28th October 2021.

To: [office@patchwaytowncouncil.gov.uk](mailto:office@patchwaytowncouncil.gov.uk) or by post to Patchway Town Council, Callicroft House, 150 Rodway Road, Patchway, Bristol, BS34 5DQ.

**Please complete in black ink or type**

**Application for the post of:**

**Contact Information**

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| --- | --- | --- | --- |
| **Please Fill in all Fields** | | | |
| First Name: |  | Surname: |  |
| Address: |  | Postcode: |  |
| Email Address: |  | Mobile Number: |  |

**Employment History**

Please provide details of your work experience including previous posts with your present employer, unpaid voluntary or casual work. If you have undertaken periods of other responsibilities raising family or caring please include these as well.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Present (or most recent) Employment** | | | | |
| Name and Address of Employer: | |  | | |
| Position Held |  | | Is this your current job? | Yes / No |
| Start Date |  | | Leaving Date (if applicable): |  |
| Notice Required |  | |  |  |
| Other Allowances |  | | Reason for Leaving |  |
| Key responsibilities and / or achievements: | | | | |
| 1.  2.  3.  4. | | | | |

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| **All Previous Employment** |

|  |  |  |
| --- | --- | --- |
| Name and Full Address of Employer | Start date, leaving date, position held and main responsibilities – giving salary | Reason for Leaving |
|  |  |  |
| *Please continue on a separate sheet if necessary* | | |
| **Please give details relating to any gaps in your employment history** | | |
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**Community Activity/Voluntary Sector Work**

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| Please highlight your experience of working in your local community or the voluntary sector | |
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**Education**

Please provide brief details of your education. Please enter most recent first

|  |  |
| --- | --- |
| Name of Educational Establishment  (School, College, University etc) | Qualifications obtained with dates, subjects and grades |
|  |  |

*Please continue on a separate sheet if necessary*

**Training**

Please provide details of all training and development undertaken relevant to this post

|  |  |
| --- | --- |
| Training Course and Organiser/ Development Activity | Date and Outcome (Grade Achieved where relevant) |
|  |  |

*Please continue on a separate sheet if necessary*

**Membership of Professional Bodies**

|  |  |
| --- | --- |
| Body | Membership Type |
|  |  |

The information provided in this section will be used to decide if you will be invited to the next stage of the selection process. It is essential therefore that you cover the requirements listed in the person specification for the job, which are listed within the job description:

**Knowledge and Skills**

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| **2.** |

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| **3.** |

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| **4.** |

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| **7.** |

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| **8.** |

**References**

Please give the name and address of two people who can provide an assessment of your suitability for this post. One of these should be your present/most recent employer or voluntary sector contact. If you have not been in paid employment since leaving full-time education please give the name of your tutor or lecturer. Please indicate by marking clearly with as asterisk (\*) if you do not want us to contact them prior to a conditional offer being made. Please note the references must cover the last three years.

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| --- | --- | --- | --- | --- |
| Name | | Address | | |
| Email Address if available | |  | | |
|  |  |  | |  |
| Position Held/  Capacity Known |  | | Day Contact Number |  |
|  |  | |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | | Address | | |
| Email Address if available | |  | | |
|  |  |  | |  |
| Position Held/  Capacity Known |  | | Day Contact Number |  |
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Please indicate below any forthcoming dates when you will not be available for interview.

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**NB: PLEASE REMEMBER TO ATTACH A COVERING LETTER DETAILING HOW YOUR SKILLS MATCH THE ROLE.**

*I understand that by submitting this application, under the General Data Protection Regulation, the information contained in this form will be processed by Patchway Town Council in line with their Data Management Policy, who will ensure that the information will be stored in paper and digital format, fairly and lawfully and will not be disclosed to any third parties or used for any purposes other than in the processing of the application.*

*I understand that Patchway Town Council will retain this information in line with their GDPR Policy.*

*Signed -*

*Date -*