



APPLICATION FORM

 Ref No:

Information supplied on this form will be treated as
STRICTLY CONFIDENTIAL

POST APPLIED
FOR:

POST NO:

1. Personal Details

SURNAME			INITIALS	
Permanent Address and Postcode:				
Address for correspondence (if different):				
Telephone No(s)	Home:		Work:	
Email Address			Mobile:	
Are we able to contact you at work?		By Phone: Yes / No		By Email: Yes / No
Do you hold a current full car driving licence?			Yes / No	

2. References

Please give two referees who can comment on your professionalism / work ability, one of whom should be your present / most recent employer

a) Present / Most Recent Employer		b) Second Referee	
Name Address		Name Address	
Position		Position	

References will normally be taken up for shortlisted applicants. Please tick the appropriate box if this is not convenient

Reference a)

Reference b)



3. Details of Secondary / Further Education

Dates	School/College/University	Qualifications Gained

4. Professional Qualifications / Membership of Professional Bodies

Dates	Full Details of Professional Qualifications

5. Interests / Leisure Activities

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6. Rehabilitation of Offenders

Have you any convictions which are not regarded as "spent" Under the Rehabilitation of Offenders Act 1974? Yes / No

If "yes", describe the offence and date of conviction

Are you currently the subject of any criminal proceedings or convictions? Yes / No

If yes please state

Failure to disclose any convictions which are not "spent" may render you liable for dismissal.

7. Relationship

Are you related to any Councillor or Officer of this Council or the partner of such persons?
Yes / No

If yes please give details (eg. Name, Position Held, Relationship)

Please note that Canvassing of Councillors or Senior Officers shall lead to disqualification.

8. Present / Most Recent Employment Details

Employers Name & Address	Job Title	
	Date Appointed	
	Date Terminated	
	Latest Salary / Scale	
	Length of Notice	

Summary of main duties / purpose of job

Please attach a copy of your current / most recent job description, if available

9. Previous Employment (starting with the most recent)

From	To	Employer & Position Held	Final Salary/Scale	Reason for Leaving
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10. Reasons for Applying

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11. Relevant Experience / Skills

Please give details of any achievements, career plans or particular areas of work experience (including voluntary work), which you feel are most relevant to this post.

Continue on a separate sheet if necessary

Please state where our advertisement was first seen

I declare that the facts given in this application are to the best of my knowledge correct. I understand that any false information may result in my dismissal, if appointed.
(Please see Note 2 on back page).

Signed

Date



DIVERSITY MONITORING

Allerdale Borough Council is committed to a policy of equality and diversity. We are asking for this information so that we can ensure we are giving a good service to all members of our community. All information is optional. All personal data supplied on this form which is subsequently stored on computer is subject to the provisions of the Data Protection Act 1998.

This page will be detached, and will not form part of the selection procedure but will be used only for statistical purposes. Please tick appropriate boxes.

1. Preferred Title

Miss Mr Mrs Ms Other

Full name:

2. Marital Status

Married Single
 Separated/ Widowed
 Divorced
 Other (please state)

3. Gender

Male Female Transgender

4. Age

Under 20 20 – 39 40 – 59 60+

5. Ethnic Origin (Please tick one box that best describes your ethnic origin).

White

Caribbean
 Irish
 Polish
 Slovakian
 other White background (please state)

Black or Black British

British
 African
 Any other Black background (please state)
 Any

Mixed

White & Black Caribbean
 White & Black African
 White & Asian
 Any other White background (please state)

Asian or Asian British

Indian
 Pakistani
 Bangladeshi
 Any other Asian background (please state)

Chinese or other ethnic group

Gypsies & Travellers

Chinese
Vietnamese
Any other (please state)

Irish Travellers
Any other (please state)

6. What is your religious belief? (Please tick one box that best describes your ethnic origin).

Christian Jewish Buddhist
Muslim Hindu Sikh Other
 Decline to state

7. Sexual Orientation

My sexual Orientation is towards someone:
Bisexual Heterosexual Gay Lesbian
Decline to state

8. Disability

Do you consider yourself to have a disability?

The Equality Act 2010 protect people who are disabled including those with long term health conditions.

Yes No Decline to state

If 'yes' please state the type of impairment which applies to you. People may experience more than one type of impairment, in which case you may indicate more than one. If none of the categories apply please tick 'other'.

Physical impairment Learning disability/difficulty
Sensory impairment Long-standing illness
Mental Health condition Other

NOTE 1 : CRITERIA FOR CLASSIFICATION AS DISABLED UNDER THE DISABILITY DISCRIMINATION ACT

To classify as disabled, a person has a physical or mental impairment which has a substantial and long term adverse effect on his / her ability to carry out normal day to day activities.

Long term is usually defined as a year or longer.

Impairment may affect:-

- mobility;
- manual dexterity;
- continence;
- ability to lift, carry or otherwise move everyday objects;
- memory or ability to concentrate, learn or understand; or
- perception of the risk of physical danger.
- speech, hearing or eyesight (but see below)

(If a person's sight is corrected by wearing spectacles or contact lenses, this is **not** regarded as a disability.)

If you have a disability, which makes it difficult to complete our application form, please contact the HR Department for assistance.

These notes are for guidance only.

NOTE 2: DATA PROTECTION

The information you supply on the application form will be used to assess your suitability for the post applied for (or another relevant post). These details will only be disclosed to those persons involved in the selection process or Personnel administration.

Allerdale Borough Council will retain the forms of unsuccessful applicants for 6 months – in accordance with current guidance.

Should you be successful, certain details from this form may be checked, and data matched to help prevent fraud. Some of the information will be entered into the Personnel Computer System, which will allow Allerdale Borough Council to administer your employment. This form will then be placed into your Personnel file, and retained until after you complete your employment with Allerdale Borough Council – for as long as legislation dictates.

By signing this form you are agreeing to the Council using the information you provide as outlined above.

Please be assured that Allerdale Borough Council will protect your information, and treat as confidential at all times.

“LEADING BY EXAMPLE, VALUING ONE ANOTHER”