



Gravesham Borough Council
Confidential Application Form

Please refer to the guidance notes before completing the application form.
Please use black ink or typescript

Application for Appointment as:	
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Closing Date:		Post Reference No:	
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Where did you see this post advertised?	
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What method did you use to request this application form? (please circle appropriate method used)	Post	Phone	E-mail	On-Line	Collected from Civic Centre
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Gravesham Borough Council is committed to equal opportunities in employment and service delivery. This page, the Recruitment Monitoring Sheet and the information on Rehabilitation of Offenders will be separated before shortlisting takes place and retained by the Personnel Section. Managers involved in the shortlisting process will make decisions based solely on the information you provide in Sections 3-4 of the application form.

Section 1 – Personal Details

Surname: _____ Title: _____ Forename(s): _____ Home Address: _____ Postcode: _____ Address for correspondence (if different from above) _____ Postcode: _____	Home Telephone Number: _____ Work Telephone Number: _____ Mobile Telephone Number: _____ E-mail Address: _____ May we contact you at work? Yes/No _____
	If offered this post, how much notice are you required to give (if you are not in employment when would you be free to start)? _____
	If the post you are applying for is temporary, part time or job share, please indicate the period preferred and times of day you would be available: _____

Preferred method of contact: Telephone Email Letter Textphone

Are you in good health? Yes/No

Please give brief details of any injuries or major illnesses over the past 2 years?

How many days and periods of absence have you had due to sickness over the past 2 years?

If you are related to any Officer or Member of the Council, please give details

Section 2 – References

Please give the details of two persons not related to you, one of whom must be your present employer (or personal tutor in the case of a student) from whom confidential references may be obtained. These may be requested before interview unless you have expressly stated otherwise below. If the name in which we should seek a reference differs from the above, please note this.

Name, address and telephone numbers of 2 referees. One should be present/last employer

Name:

Job Title:

Address:

Telephone No:

e-mail address:

Name:

Job Title:

Address:

Telephone No:

e-mail address:

May we contact your current employer prior to interview?

Yes/No

Section 3 – Employment History

Details of your current or most recent employer:	
Employer's name and address: Nature of business:	Job title:
	Start date:
	Leaving date: (if applicable)
	Reason for leaving:
	Current Salary:
	Period of notice:
Summary of Job Responsibilities:	

Please give any dates when you would not be available for interview:

Previous Employment

Details of previous employment (most recent first). Continue on an additional sheet if necessary.

Employer's name and address	From	To	Position held and summary of responsibilities	Reason(s) for leaving

Section 4 – Skills and Experience

Please explain why you think you are suitable for this post by indicating how you satisfy the criteria on the person specification drawing on your personal and work experiences, education, training and personal interests. Please do not attach a CV as a substitute for this section as you should address the criteria on the person specification.

Skills and Abilities

Knowledge

Education, Training and Qualifications

Please give details of educational qualifications you have obtained from school, college, university, and/or professional qualifications. Shortlisted candidates will be expected to provide proof of qualifications obtained.

Secondary Education

Examinations taken and grades obtained

Further Education (University/College/Apprenticeships etc.)

Examinations to be taken and qualifications obtained including details of any current studies.

Training and Development

Please give details of any relevant training other than that identified above.

Membership of professional bodies/professional qualifications

Name of body/qualification	Class/grade of membership	Date obtained

Experience

Qualities and Special Conditions

Please mention any other skills, training or experience that you consider relevant to the post:

Do you own/have the use of a car?	Yes / No
Have you a current driving licence?	Full <input type="checkbox"/> Provisional <input type="checkbox"/> HGV <input type="checkbox"/>
Have you got any driving endorsements (This information will be considered if driving is a requirement of the role.)	Yes/No If Yes, please give details:

Declaration	
<p>I confirm that the information provided on this application form is true and correct and that the information may be used for registration purposes under the Data Protection Act 1998.</p> <p>I understand that deliberately giving false or incomplete answers, canvassing of any staff of the Gravesham Borough Council, the Mayor of Gravesham or Members of Gravesham Borough Council, would disqualify me from consideration or, in the event of my appointment, make me liable to dismissal without notice. If you are returning this form electronically and unsigned you will be bound by the declaration when the Gravesham Borough Council receives the electronic application.</p>	
Signature of applicant	Date

Please return your completed application form to The Personnel Department, Gravesham Borough Council, Civic Centre, Windmill Street, Gravesend, Kent, DA12 1AU. If returning your form electronically, send it to vacancies@gravesham.gov.uk specifying the post title and reference as the subject.

Gravesham Borough Council

Recruitment monitoring questionnaire

Gravesham Borough Council operates an equal opportunities policy to ensure that all appointments are made on merit. To help us ensure that our recruitment procedures operate in such a way as to provide genuine equality of opportunity, and for no other reason, please answer the brief questions below. This form will be detached from the application form and will not be seen by the shortlisting panel.

Position applied for:

Post ref no:

Surname:

Name:

Date of birth:

Age:

Gender: Male Female

Do you consider yourself to have a disability?

Please tick appropriate box Yes No

Do you meet the Disability Discrimination Act definition of disability? (see **Disability** under Guidance Notes)

Please tick appropriate box Yes No

If yes, what arrangements, if any, would be needed if you are called for interview?

Employment restrictions

Do you need a work permit to work in the UK? Yes No

If yes, please give details.

What is your ethnic group?

1. White

- a) British
- b) Irish
- c) Scottish
- d) Welsh
- e) Any other White background

2. Mixed

- a) White and Black Caribbean
- b) White and Black African
- c) White and Asian
- d) Any other Mixed background

3. Chinese or Chinese British or Any Other Ethnic Group

- a) Chinese
- b) Any other ethnic group

4. Black or Black British

- a) Caribbean
- b) African
- c) Any other Black background

5. Asian or Asian British

- a) Indian
- b) Pakistani
- c) Bangladeshi
- d) Any other Asian background

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Rehabilitation of offenders declaration

Disclosure of: criminal convictions, cautions or bind-overs

Candidates are required to disclose details of all criminal convictions, cautions or bind-over orders that are not spent. You must disclose all such matters but you can be assured that only those deemed relevant to the appointment will be considered.

Please complete the following declaration as appropriate and seal it in the enclosed envelope, returning it along with your application form. See paragraph **Rehabilitation of Offenders** under Guidance Notes.

Failure to complete this form, or to disclose any convictions, cautions or bind-over orders, may result in an offer of appointment being withdrawn, or dismissal following appointment.

This information will be treated with the utmost confidence.

a) I declare that I have no criminal conviction, cautions or bind-over orders to disclose.

Name	Date
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b) I declare below details of convictions, cautions or bind-over orders as follows:

Date of Offence	Nature of Offence	Outcome
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<div style="border: 1px solid black; height: 150px;"></div>		

Name	Signed	Date
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