

Post Applied for:

Facilities Manager

Post Number:

1

# Sunningdale Parish Council Job Application Form

Closing Date:

9am 23<sup>rd</sup> April 2019

Interview Date:

Please complete this form fully using black ink or type. C.V's are only accepted when submitted with the completed application. Applications received after the closing date will not normally be considered.

**THE INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE.**

## Section 1 Personal details

Last Name:

First Name:

Address:

Postcode:

Home Telephone N<sup>o</sup>:

National Insurance N<sup>o</sup>:

Letters	Numbers	Letter

Daytime Telephone N<sup>o</sup>:

Mobile Telephone N<sup>o</sup>:

E-mail address:

Can we contact you at work?

Yes

No

Are you free to remain and take up employment in the UK with no current immigration restrictions?

Yes

No

### Driving Licence

Do you hold a full, clean driving licence valid in the UK?

Yes

No

**If you are successful you will be required to provide relevant evidence of the above details prior to your appointment.**

## Section 2 Present Employment

**Present or Last Employment** (If unemployed give details of last employer)

**Name of Employer:**

**Address:**

  
  

**Postcode:**

**Post Title:**

**Date of Appointment:**

**Salary:**

**Department / Section:**

**Brief description of duties:**

Continue on a separate sheet if necessary

**Period of Notice:**

**Last day of service**

(if no longer employed):

**Reason for leaving**

(if no longer employed):

## Section 3 Previous Employment

**Previous Employment** (most recent employer first). Please cover the last 10 years and state nature of business - if not public sector

Name of Employer:

Address:

  
  

Position Held:

Employment  
from and to:

  

Summary of duties:

Reason for leaving:

Name of Employer:

Address:

  
  

Position Held:

Employment  
from and to:

  

Summary of duties:

Reason for leaving:

Name of Employer:

Address:

  
  

Position Held:

Employment  
from and to:

**Summary of duties:**

**Reason for leaving:**

## Section 4 Education

Qualifications obtained from Schools, Colleges and Universities. Please list highest qualification first:

College or University	Course	Qualifications and grades obtained
School	Subjects	Qualifications and grades obtained

Continue on a separate sheet if necessary

## Professional, or Technical Qualifications

Please give details:

Professional/Technical/Qualifications	Course Details

Membership of any Professional / Technical Associations- Please state level of Membership:

Continue on a separate sheet if necessary

## Section 5 Training and Development

Please give details of any training and development courses or non-qualifications courses which support your application. Include any on the job training as well as formal courses.

Title of Training Programme or Course	Duration of Course

## Section 6 Personal Statement

**Abilities, skills, knowledge and experience.**

Please use this section to explain in detail how you meet the requirements of the Person and Job Specifications. If you are or have been involved in voluntary/unpaid activities, please also include this information. Attach and label any additional sheets used.

## Section 7 Rehabilitation of Offenders Act (1974)

Do you have any convictions that are unspent under the Rehabilitation of Offenders' Act 1974? Yes  No

If yes, please give details / dates of offence(s) and sentence:

## Section 8 Protecting Children and Vulnerable Adults

You will be required to have a Disclosure and Barring (DBS) check made.

### Enhanced Checks Only

Are you aware of any police enquires undertaken following allegations made against you, which may have a bearing on your suitability for this post? Yes  No

## Section 9 Disability Discrimination Act

This Act protects people with disabilities from unlawful discrimination. We actively encourage applications from people with disabilities. The Disability Discrimination 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 your application? Yes  No

If yes, please give details:

We will try to provide access, equipment or other practical support to ensure that people with disabilities can compete on equal terms with non-disabled people.

Do we need to make any specific arrangements in order for you to attend the interview? Yes  No

If yes, please give details:

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## Section 10 References

Please give the names and addresses of your two most recent employers (if applicable). If you are unable to do this, please clearly outline who your references are.

Reference 1		Reference 2	
<b>Name:</b>	<input type="text"/>	<b>Name:</b>	<input type="text"/>
<b>Position (job title):</b>	<input type="text"/>	<b>Position (job title):</b>	<input type="text"/>
<b>Work Relationship:</b>	<input type="text"/>	<b>Work Relationship:</b>	<input type="text"/>
<b>Organisation:</b>	<input type="text"/>	<b>Organisation:</b>	<input type="text"/>
<b>Address:</b>	<input type="text"/>	<b>Address:</b>	<input type="text"/>
	<input type="text"/>		<input type="text"/>
	<input type="text"/>		<input type="text"/>
	<input type="text"/>		<input type="text"/>
	Postcode <input type="text"/>		Postcode <input type="text"/>
<b>Telephone N°:</b>	<input type="text"/>	<b>Telephone N°:</b>	<input type="text"/>
<b>E-mail:</b>	<input type="text"/>	<b>E-mail:</b>	<input type="text"/>

Are you willing for this referee to be approached prior to the interview? **Yes**  **No**

Are you willing for this referee to be approached prior to the interview? **Yes**  **No**

**Working days absent or sick in the previous 12 months:** \_\_\_\_\_

Please give reasons \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



## Section 12 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 Sunningdale Parish Council? Yes  No

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

If appointed, do you have any interests or hold any appointments that may conflict with employment by the Council in the role for which you have applied? Yes  No   
If yes, please detail on a separate sheet.

### B. Statement to be Signed by the Applicant

The Council is committed to an anti-fraud culture and participates in statutory anti-fraud initiatives.

Please complete the following declaration and sign it in the appropriate place below. If this declaration is not completed and signed, your application will not be considered.

**I acknowledge that the Council is under a duty to protect the public funds it administers and to this end I agree it may use information provided on this form for prevention and detection of crime and it may share this information with other bodies solely for these purposes. I hereby give consent to such collection, storage and processing of my personal data and I agree that the information given on this form may be used for data registration purposes.**

I hereby certify that:

- all the information given by me on this form is correct to the best of my knowledge
- all questions relating to me have been accurately and fully answered
- I possess all the qualifications which I claim to hold
- I have read and, if appointed, am prepared to accept the conditions set out in the conditions of employment and the job description.

Signed:

Date:

Thank you for your interest in this post.

**Sunningdale Parish Council undertakes that it will treat any personal information (that is data from which you can be identified, such as your name, address, e-mail address etc) that you provide to us, or that we obtain from you, in accordance with the requirements of the Data Protection Act 1998.**

## RETURNING THIS FORM



**By Hand or Post:**

**Sunningdale Parish Office**  
The Pavilion  
Broomhall Lane  
Sunningdale  
SL5 0QS

**By email:**

**info@sunningdaleparish.org.uk**