

**Applicant No.**

(Office use only)

### Broxtowe Borough Council Application Form

‘**Actively building a culture of diversity and equality’**

**CONFIDENTIAL**

Please complete accurately in full and in **Black ink**

Please note that CV’s will not be considered

#### *Sections 1 - 4 of the application form will be detached prior to shortlisting to ensure applications are considered on merit and to eliminate any possibility of discrimination.*

**1. PERSONAL DETAILS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Post applied for: | | | | |
| Post reference: | | | Closing date: | |
| Surname: | | | Title: |
| Forenames: | | | Date of Birth: |
| Home Address:  Post Code: | | | |
| Home Tel No: | Mobile Tel No: | | |
| Work Tel No:  Can we contact you on this number? YES/NO | Email address: | | |
| Preferred Contact Number: |
| Are you related to any Councillor or employee of this Council? YES/NO  If yes, please state who: | | | |
| Do you require a work permit? YES/NO | | National Insurance Number: | |
| DECLARATION:  I declare that the information given in this application is true. I understand that any failure to disclose information, or any attempt to mislead the Council may, if I am appointed, lead to disciplinary action being taken. I understand that any canvassing, directly or indirectly, or failure to disclose any relationship to a Councillor or Officer of the Council will disqualify me as a candidate.  In accordance with the General Data Protection Regulation 2016, I hereby give my consent for the information I have provided in this application to be used for the purposes outlined only on this form and as stated in the Guidance Notes for Applicants.  **Signed** …………………………………………………………. **Date** ………………………… | | | |

1. **EQUALITY ACT 2010.** Please refer to the guidance notes for further information.

|  |
| --- |
| 1. Do you consider that you have a disability YES/NO   We ask the question about your disability to help us comply with our policy to offer interviews to all applicants with a disability who meet the essential criteria for the job.   1. If you would like any assistance if called for interview, please provide details: |

1. **REHABILITATION OF OFFENDERS ACT 1974.** Please refer to the guidance notes for further information.

|  |
| --- |
| Do you have any convictions, cautions, reprimands or final warnings that are not “protected” as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013) by SI 2013 1198’.  YES/NO \*If you answered yes, please provide details and dates (use additional sheets if necessary):  Please click on the link below to read up on the: [Filtering Guidance List](https://www.gov.uk/government/publications/dbs-list-of-offences-that-will-never-be-filtered-from-a-criminal-record-check)  Failure to disclose such convictions could result in dismissal. Any information will be treated in the strictest confidence. |

1. **EQUALITIES MONITORING** To help us check our recruitment procedures are in accordance with Council policy and legislative requirements, the Council monitors the ethnic makeup of its employees and those applying for employment. In order to help monitor the effectiveness of its policy, and for no other reason, please complete the following section. This information will be treated as confidential and kept separately from your application. It will not be available to those shortlisting.

|  |
| --- |
| **Gender:** Male Female |
| **White:**  British Irish Other …………………………………………..  **Mixed:**  White/Black Caribbean White/Black African  White/Asian Other mixed background ……………………… Asian or Asian British: Indian Pakistani  Chinese  Bangladeshi Other Asian background ………………………  **Black or British:**  Caribbean African Other Black background ……………………..  **Other Ethnic Groups:** |

|  |  |
| --- | --- |
| **Broxtowe Borough Council** | **Applicant Number:**  (Office use only) |

|  |  |
| --- | --- |
| Post applied for: | |
| Post Reference: | Closing date: |

**5. EMPLOYMENT HISTORY** Please indicate any gaps in employment and use additional pages if required. If this is your first job after leaving full-time education, you may wish to give details of temporary employment or work experience placements.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| PRESENT OR MOST RECENT EMPLOYMENT | | | | | | |
| Name and Address of Employer: | | | | | Tel. No: | |
| Job Title: | | | Salary: | | Grade: | |
| Date Commenced:  Leaving Date: | | | Reason for Leaving: | | Notice Required: | |
| Duties and Responsibilities | | | | | | |
|  | | | | | | |
| PREVIOUS EMPLOYMENT | | | | | | |
| From | To | Name and address of Employer | | Job title and duties | | Reason for leaving |
|  |  |  | |  | |  |

**6. EDUCATION AND TRAINING**  Please include secondary education, continuing education (university/college/apprenticeship, etc), together with any relevant training and development courses you have successfully completed. You will be required to produce the original certificates/documentation for any qualifications you have achieved.

|  |  |  |  |
| --- | --- | --- | --- |
| Qualifications and training courses (professional/trade/job related) completed | | | |
| Date | Subject | Level | Grade |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Current Membership of Professional Bodies | | | |
| Name of Institute/Association | Grade of Membership | Date Achieved | Gained by Exam  Yes/No |
|  |  |  |  |

**7. ADDITIONAL INFORMATION (See guidance notes)**

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| --- |
| Please supply additional information that you feel appropriate to your application, including achievements and skills gained, which you consider relevant to the post and that relate to the criteria contained in the person specification.Continue on separate sheets if necessary. Please number any additional sheets. |

**8. REFEREES** Please give the details of two people, not relatives, who have consented to act as referees on your behalf, one of whom must be your present or most recent employer. Confidential references will be taken up, normally by email or letter after appointment only. No appointment will be confirmed until satisfactory references have been received.

|  |  |
| --- | --- |
| **Name, address, telephone number and email address:** | **Capacity in which Referee knows you:** |
| **1.**  Post code:  Tel No. Email address |  |
| **2.**  Post code:  Tel No. Email address |  |
| **Please state to confirm that you consent to us contacting previous or current employers or any other 3rd party in order to obtain a reference.** | **YES / NO** |

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| --- |
| **Do you have a full current driving licence?** YES/NO  Car: HGV: Motorcycle:  Please give details of any endorsements ………………………………………………………………………. Do you have access to transport for work purposes? YES/NO |

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| **Please provide dates/times when you cannot attend for interview:** |

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| --- |
| **Please state where you saw this vacancy:** |

Please return to:

**Human Resources Division, Broxtowe Borough Council,**

Town Hall, Foster Avenue, Beeston, Nottingham, NG9 1AB

or:

**hrd@broxtowe.gov.uk**



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