



Application Form

Human Resources

Jobs@Swindon
Swindon Borough Council
Civic Offices, Euclid Street
Swindon SN1 2JH
Tel: 01793 464439
Fax: 01793 610202
Email: jobs@swindon.gov.uk
Web: www.swindon.gov.uk/jobs

Code:

Please refer to enclosed guidance notes when completing application form.
Remember, complete the form in black ink or typeface.

1 Vacancy Details

Job(s) Applied For:

Ref No:

2 Present or most recent employment, voluntary work or role

Job Title:

Name of Employer:

Hours worked:

Employer's Address:

Dates employed:

Notice period:

Current salary plus benefits:

Postcode:

Key duties:

3 Reason for wishing to leave or left:

The Working Time Regulations place a maximum limit on weekly hours worked (48 hours).
Will you continue in any other employment, should you be offered this appointment?

YES NO

4 Previous Employment

Starting with the most recent first, please give details of jobs held including part time and unpaid work. Do not include the details provided in Section 2 of the application form. Continue on a separate sheet if necessary.

Name of employer	Job title and main duties	Reason for leaving and length of employment
Crazy Cooks	Trainee Chef - food preparation, cooking, creating menus and ordering stock	Moved to permanent job working full time 1 year and 3 months
723 Stores	Sales Assistant - serving customers, stock taking, cash handling	To train as a chef 1 Year and 9 months working part time
Cutie Kids Nursery	Unpaid Volunteer Nursery Assistant - Helped Nursery Nurse run sessions with children aged 2-5 e.g. reading, painting and drawing, music, outdoor play sessions.	Moved to paid work 3 years

5 Education

Please give details of any educational, technical and/or professional qualifications. If you are currently studying please provide details of the qualifications you are studying for.

Examinations/qualifications taken or to be taken (include subjects)	Results and grades
GCSE Food Technology	Grade A
GCSE English, Mathematics	Grade C
GCSE History, Biology	Grade D
Foundation Food Hygiene Certificate	Pass
NVQ Level 2 Food Preparation	

6 Training

Please list any course(s), which you have undertaken that are relevant to the job and/or specified on the person specification. Continue on a separate sheet if necessary.

Length of course	Course title	Organising body
4 days	First Aid	St Johns Ambulance

7 Membership

Please indicate membership of any organisation(s) relevant to the job.

Name of organisation	Type of membership	Is membership current?
St Johns Ambulance	Full member - qualified first aider	Yes
Cutie Kids Nursery	Member of Fundraising Committee	

8 Skills, Abilities, Experience and Achievements

Please give details of your skills, abilities, achievements and experience (including outside interests) and use examples to demonstrate how you meet each of the criteria listed in the person specification. You may continue on **up to 2 separate sheets** and attach if necessary.

To complete this section it is important to read the requirements on the person specification. You must be able to meet all the essential requirements for the post. You may find it useful to provide an example for each of the requirements to show you have the skills, abilities and experience to perform the job.

The information on page 4 and 5 will be detached from the application form prior to short listing.

<p>Surname <input type="text" value="BLOGGS"/></p> <p>Title Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/></p> <p>Other <input type="text"/></p> <p>Address <input type="text" value="201 PRINCESS STREET"/></p> <p><input type="text" value="SWINDON"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p>Postcode: <input type="text" value="SN1 1XX"/></p>	<p>Forename(s) <input type="text" value="JOSEPH"/></p> <p>Date of Birth <input type="text" value="04/10/1974"/></p> <p>Is this a job share application?</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>Contact details (please tick preferred contact detail)</p> <p><input checked="" type="checkbox"/> Home <input type="text" value="01793 007007"/></p> <p><input type="checkbox"/> Work <input type="text"/></p> <p><input checked="" type="checkbox"/> Mobile <input type="text" value="017717 400004"/></p> <p><input type="checkbox"/> E-mail <input type="text"/></p>
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Are you eligible to work within the UK? YES NO

Are you required to have a work permit to work in the UK? YES NO

Convictions/Disqualifications

Please give details and dates of a) any convictions (including driving offences) and/or b) disqualifications from driving or performance of professional duties.

Canvassing

In order to ensure fairness and openness of our selection process please state whether you are related to, or in a close personal relationship with a Councillor or employee of Swindon Borough Council.

YES NO If yes, please give details:

Name: Relationship with yourself:

Position in Council:

Please note that canvassing of Councillors or employees of Swindon Borough Council in relation to this application will disqualify any applicant. If evidence of this is discovered after appointment you may be dismissed without notice.

Declaration

I declare that the information I have given in this application is correct and complete. I understand that any false statements or failure to disclose information requested on this form may result in my application being disqualified or may lead to my dismissal or disciplinary action if appointed.

Signature

Date

Data Protection

All information on this form will be treated in strictest confidence and used to process your application for employment. If you are appointed, this application will form the basis of your personal file and information on this form may be held on computer.

If your application is unsuccessful your details will be kept for a period of 1 year and will then be destroyed.

You are requested to complete this information to enable us to monitor the effectiveness of our Corporate Equalities Strategy. This information will be used solely for monitoring purposes, will be treated as confidential and will be separated from the application form on receipt and before selection procedures commence.

Please place a tick in the boxes where applicable

Are You? Male Female

Please indicate your current age band

Up to 19 20-29 30-39 40-49 50-59 60-69 Over 70

How would you describe your ethnic origin?

- White**
- British
 - Irish
 - Polish
 - Italian
 - Any other White background

- Black or Black British**
- Caribbean
 - African
 - Any other Black background

- Mixed**
- White and Black Caribbean
 - White and Black African
 - White and Asian
 - Any other Mixed Background

- Asian or Asian British**
- Indian
 - Pakistani
 - Bangladeshi
 - Any other Asian background

- Chinese or other Ethnic Group**
- Chinese
 - Any other ethnic group

Do you consider yourself to have a disability? Yes No

If yes, please tick the appropriate boxes

- Dyslexia
- Deaf/Hearing Impaired
- Wheelchair User/Mobility Impairment
- Blind/Partially Sighted
- Mental Health Difficulties
- Unseen e.g. Diabetes, Epilepsy

Where did you see this vacancy advertised?

- Local Newspaper
- National Newspaper
- Professional Journal
- Job Centre
- Internet (please state website below)
www.
- Other

Are you currently employed by Swindon Borough Council? Yes No

If you wish, you may disclose information about yourself in this section about your:

Religion:

Sexual orientation:

11 **Disability**

We guarantee to interview disabled applicants who meet the **essential** requirements for the post.

Do you consider yourself to have a disability? YES NO

Please state any particular assistance or facilities you may require in attending an interview.

12 **References**

Please give details of **3 referees** who are able and willing to comment on your suitability for the job. One of who must be your present or most recent employer. If you have just left full time education you should give details of your course tutor or teacher. References from **friends or relatives** are not acceptable.

Name	MR R RUDD	Position/Occupation	MANAGER
Address	CHEFSRUS	Telephone Number	01793 222222
123 COOK STREET, SWINDON	Fax Number	N/A	
SN57 7HA	E-mail	R.Rudd@chefsrus.co.uk	

May we contact referee prior to interview YES NO Relationship to yourself
MANAGER

Name	MRS A MORRIS	Position/Occupation	MANAGER
Address	CRAZY COOKS	Telephone Number	01432 000100
HIGH STREET, HEREFORD	Fax Number	01432 000101	
HR1 1BY	E-mail	N/A	

May we contact referee prior to interview YES NO Relationship to yourself
MANAGER

Name	MISS A SMITH	Position/Occupation	LECTURER
Address	FIRST COLLEGE	Telephone Number	01793 600000
HILTON ROAD, SWINDON	Fax Number		
SN53 6PX	E-mail	ALISONSMITH@FIRSTCOLLEGE.ORG.UK	

May we contact referee prior to interview YES NO Relationship to yourself
COLLEGE TUTOR