



CHICHESTER CITY COUNCIL

APPLICATION FOR EMPLOYMENT

Please write clearly in black ink. Use an additional sheet were necessary.

TITLE OF POST APPLIED FOR :

1. PERSONAL DETAILS

Name :

Address :

Contact Telephone No :

Email Address :

Do you hold a Current Driving Licence YES/NO

Do you own any form of transport? YES/NO
If so please specify

Are you related to any Council Member or Employee? YES/NO
If so please give details

(NB : Failure to disclose such a relationship and/or canvassing will disqualify you from this application)

Interests outside work :

2. EDUCATION, PROFESSIONAL AND TRAINING QUALIFICATIONS

(Original documents as proof of qualification should be produced if invited for interview)

Name of School, College, University, etc

From :

To :

Professional Qualifications currently held, grade/level attained and date achieved

Membership of Professional Bodies

Please state level of membership and date achieved

Training

Please give details of any training you have undertaken that may be of relevance to the position applied for

3. EMPLOYMENT HISTORY

PRESENT POST

Title of Post :

Salary/Grade :

Business of Employer :

Date commenced :

Date ended (if applicable) :

Name & Address of Employer :

Please outline responsibilities, to whom you are responsible and staff responsible to you (if applicable) :

Reason for leaving or wishing to leave :

Period of notice required to terminate present employment :

PREVIOUS EMPLOYMENT

(Please continue on separate sheets if necessary)

Name & Address of Employer :

Position held :

From :

To :

Reason for leaving and final salary :

Name & Address of Employer :

Position held :

From :

To :

Reason for leaving and final salary :

4. RELEVANT EXPERIENCE

Please say why you consider that you are a suitable candidate for this post, outline aspects of your experience and give details of any particular achievements or distinctions which you consider relevant to this application, referring to the Person Specification when giving your response. (Please continue on separate sheets if necessary)

5. OTHER INFORMATION

Health

Please state the number of days sickness absence in the last 2 years :

Disability

If you have a disability please tell us about any adjustments we may need to make to assist you with selection process.

Rehabilitation of Offenders

Have you ever been convicted of or are you currently charged with any criminal offence (other than a conviction spent under the provisions of the Rehabilitation of Offenders Act 1974)

YES/NO

If Yes please give details :

6. REFERENCES

Names and addresses of two referees, one of whom should be a current or recent employer :

Name :

Name :

Address :

Address :

Tel No :

Tel No :

Email :

Email :

References maybe taken up prior to interview

7. DECLARATION

I declare that the information is true and correct

Signed : _____

Date : _____

Please return the completed application form to:

The Town Clerk,
Chichester City Council,
The Council House,
North Street,
Chichester, PO19 1LQ

Closing date for applications:

Interviews will be held week commencing