APPLICATION NUMBER:	
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BUDLEIGH SALTERTON TOWN COUNCIL

Applicati	on for th	e post of:	_	WN CLERK ICER	AND RES	PON	SIBLE F	INANC	IAL
			(Ful	II time 37 ho	ours per v	veek)			
ersonal l	Details								
Surname				Forenames					
Title		Male \square	Fe	male	Date of	birth			
Address				Home telepho	ne				
				Mobile telepho	one				
				Work telephor	ne				
				E-mail addres	s				
				May we conta	ct vou at work	:?	Yes	Пи	о Г
				may we coma	or you at mon	••	. 00		о _
Ethnic origin	n: The follow	ving categories a oup. They are no		ed by the Commi nationality, place					
White Brit	· · · <u> </u>	Indian		W	hite and Asiar		ВІ	ack Africa	ın 🗀
White Ir	rish 🗌	Pakistani		White and	l Black Africar	ı 🗆	Black	Caribbea	ın 🗀
Chine	ese 🗌	Bangladeshi		White and Bla	ack Caribbear		Another e	thnic grou	ір 🗆
	Please sta	ate any other eth	nic grou	ір					
Disability:	impairme	nt that has a subs	stantial	Discrimination Ad and long term ad thas lasted for 12	verse effect o	n your a			-to-
	Do you co	onsider yourself to	o be dis	abled?			Yes	□ N	0 [
	If Yes abo	ove, please descr	ibe you	r disability.					
Please let us	s know if you	u need any speci	al help o	or assistance if ye	ou are invited	to atten	d an intervie	·W.	

Convictions	
Have you been convicted of a criminal offence? If yes, please give details. (Convictions which are deemed 'spent' under the Rehabili	Yes No litation of Offenders Act (1974) need not be disclosed.)
References	
	who can provide references for you. They must be able to your present or most recent employer, or a teacher if you atives.
Telephone E-mail In what capacity do you know this person? May we approach them before Yes No interview?	Telephone E-mail In what capacity do you know this person? May we approach them before Yes No interview?
Asylum and Immigration Act 1996	
Are you entitled to work in the UK? If you are offered this job, confirmation of your appointment either a previous employer, the Inland Revenue, the DSS Insurance Number. If you do not have a National Insurandocument confirming that you are eligible to live and work	S or the Employment Service confirming your National nee Number you will need to supply some other appropriate
Declaration	
Canvassing of any Councillor or officer of the Council, dir result in immediate disqualification. In accordance with local government legislation you are read to any Councillor or senior officer of the P If yes, please state the name of the Councillor or senior of	Parish Council? Yes No
I confirm the above information to be correct and ackr prejudice my application and if appointed may result	nowledge that an untruthful statement made by me will in my dismissal from the Council's service.

APPLICATION NUMBER:	

BUDLEIGH SALTERTON TOWN COUNCIL

PART II

OFFICER

(Full time 37 hours per week)

Education

	List here all schools, colleges, university etc. you have attended since the age of 11.						
ĺ	D	ate	Name of school,	Give details of subjects studied,			
	From	То	college, university etc.	examinations taken and results			

Training Give details of any relevant training received and/or courses attended, including dates. **Employment History Present or Last Post** Employer's name Employer's address Post title To whom responsible (name and position) Date appointed Period of notice Is your employment permanent? If not, when will it end? Yes 🗌 No 🗌 Annual salary Date left (if applicable) Other benefits Reason for leaving / wanting to leave Description of duties, responsibilities and achievements.

Previous Posts

Please give details of other positions held since completing full-time education, starting with the most recent and working back. Please include periods of relevant voluntary work and work experience.

D From	ate To	Name of employer	Position and main duties	Reason for leaving/ end salary
1 10111	10			cha salary

Activities Outside Work Please give details of learning or activities outside work that are relevant to the job you are applying for. This may include skills gained during career breaks, voluntary activities or home based work, etc. Please explain how they have increased your experience and abilities. **Driving** Yes 🗌 No 🗌 Do you hold a current driving licence? Please give details of any endorsements. **Membership of Professional Institutes or Bodies** Institute/Body Class of Membership Year of Election (indicate if by examination)

Additional Information

Please provide details as to why you are applying for this post; and what you can offer in terms of your abilities/skills/aptitudes/experience/achievements/personality.					
	Any additional sheets should be secured to the application.				