The information given by you on this form will be the basis upon which the decision is made whether or not to invite you for interview. Please return your completed Application and Equal Opportunities Monitoring Form to the address shown at the foot of this application

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| ***1. VACANCY DETAILS*** |
| Post for which you are applying: | Click here to enter text. |

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| ***2. PERSONAL DETAILS*** |
| Mr |[ ]  Mrs |[ ]  Miss |[ ]  Ms |[ ]  Other: | Click here to enter text. |
| Surname: | Click here to enter text. | First name(s): | Click here to enter text. |
| Address: | Click here to enter text. |
| Contact number: | Click here to enter text. | Email: | Click here to enter text. |

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| ***3. EDUCATION – Please list below your educational history starting with the most recent*** |
| Dates | University/College/School | Qualifications including Subject and Grade |
| Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. |

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| ***4. TRAINING – Please list below any relevant job related training and professional qualifications obtained*** |
| Click here to enter text. |

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| ***5. EMPLOYMENT – Please list below your employment history starting with the most recent***  |
| Dates | Employer | Position Held, Description of Duties and Salary | Reason for Leaving |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |

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| ***6. EXPERIENCE & RELEVANT SKILLS – Please provide a supporting statement below detailing your suitability for the post*** |
| Click here to enter text. |

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| ***7. DRIVING LICENCE*** |
| Do you hold a current full driving licence? | YES |[ ]  NO |[ ]
| Are you a car owner? | YES |[ ]  NO |[ ]

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| ***8. REHABILITATION OF OFFENDERS ACT 1974*** |
| Have you ever been convicted by a court of any offence? | YES |[ ]  NO |[ ]
| \*If YES, please give details including date, court and nature of offence: | Click here to enter text. |

**\*DO NOT include convictions which are ‘spent’ by virtue of the provisions of the Rehabilitation of Offenders Act 1974**

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| ***9. REFERENCES – Please provide two referees one of which must be your current or most recent employer*** |
| Name: | Click here to enter text. | Position: | Click here to enter text. |
| Address: | Click here to enter text. |
| Contact number: | Click here to enter text. | Email: | Click here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| Name: | Click here to enter text. | Position: | Click here to enter text. |
| Address: | Click here to enter text. |
| Contact number: | Click here to enter text. | Email: | Click here to enter text. |

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| ***10. DECLARATION*** |
| Are you related to a Councillor or employee of this Council? | YES |[ ]  NO |[ ]
| If appointed, do you have any business/financial interests that may conflict with the duties of this job? | YES |[ ]  NO |[ ]
| \*If YES, please give brief details: | Click here to enter text. |

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| ***I declare to the best of my knowledge the information contained in this application is correct*** |  |
| Signed: | Click here to enter text. | Date: | Click here to enter text. |

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**Equal Opportunities Monitoring Form**

Ketley Parish Council is committed to a policy of equality of opportunity and aims to provide a working environment which is free from unfair discrimination and will enable staff to fulfil their personal potential. Ketley Parish Council aims to ensure that no individual is unjustifiably discriminated against on the basis of gender or marital status, race, ethnic or national origin, disability, religious or political beliefs, sexual orientation, age, family circumstance or other irrelevant distinction.

Data Protection Act 1998: The information is requested to enable the Ketley Parish Council to monitor its employment decisions and meet statutory obligations.

In order to monitor the effectiveness of our policies and procedures and how well we meet our legal requirements all applicants are requested to complete this form. The information you provide will be treated as strictly confidential and will be used only for equal opportunities purposes. It will not be taken into consideration for short listing or interviewing purposes. If you are appointed the information will be transferred to your personnel record to enable the parish council to meet monitoring requirements. The information will not be relevant or disclosed in consideration for salary progression, promotion, or training and development.

*Please click the boxes which most closely relate to you*

|  |
| --- |
| ***GENDER*** |
| Male |[ ]  Female |[ ]

|  |
| --- |
| ***AGE*** |
| Under 18 |[ ]  19 - 30 |[ ]  31 - 40 |[ ]  41 - 50 |[ ]  51 - 60 |[ ]  61 - 70 |[ ]  71 over |[ ]

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| ***ETHNICITY*** |
| Asian or Asian British - Bangladeshi |[ ]  Chinese |[ ]
| Asian or Asian British - Indian |[ ]  Mixed - White and Asian |[ ]
| Asian or Asian British - Pakistani |[ ]  Mixed - White and Black African |[ ]
| Asian or Asian British - Any other Asian background |[ ]  Mixed - Any other Mixed background |[ ]
| Black or Black British - African |[ ]  White - British |[ ]
| Black or Black British - Caribbean |[ ]  White - Irish |[ ]
| Black or Black British – Any other Black background |[ ]  White - Any other White background |[ ]
| Not known / prefer not to say |[ ]   Any other: Click here to enter text. |

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| ***SEXUAL ORIENTATION*** |
| Bisexual |[ ]  Gay |[ ]  Heterosexual |[ ]  Lesbian |[ ]  Prefer not to say |[ ]

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| ***DISABILITY*** |
| *Under the Disability Discrimination Act (DDA) disabled people have a legal right to fair treatment in employment. The DDA defines a disability as a physical, sensory or mental impairment which has, or had, a substantial and long-term adverse effect on a person’s ability to carry out normal day to day activities.* |
| Do you consider yourself to be disabled within the definition of the DDA? | Yes |[ ]  No |[ ]  Prefer not to say |[ ]
| If you answered Yes and wish to give details of your disability, please do so here: | Click here to enter text. |

*Thank you for your co-operation. Please return with your application.*