

Uttlesford District Council
Council Offices
London Road
Saffron Walden
Essex
CB11 4ER



Application for employment

Guidance notes on the completion of this form

1. This application form consists of 2 parts. We use the first part to monitor the Council's Equal Opportunities Policy and we will remove it before shortlisting.
2. The second part asks you about your education, training and employment history, and gives you the opportunity to provide information in support of your application.
3. Please complete all sections of the form. Please type or write your answers in **BLACK INK**. Use the final page if you need more space.
4. Do not enclose a C.V. Only include other material if we ask you to do so in the accompanying details. The selection panel will only consider information provided on this form, associated supplement or any continuation sheets.
5. Referees should be your current and previous employers (not from the same organisation). If you are a student or school leaver put your Head of Course and a personal referee. If you are unemployed, give your last two employers. If you have only worked for one employer please advise us of a personal referee.
6. If you have a disability we will make adjustments to the interview and working arrangements providing it is reasonable to do so, in accordance with the Equality Act 2010. Please let us know if you need the application form in a different format, for example on audio-tape.

EQUAL OPPORTUNITIES STATEMENT

The Council opposes all forms of discrimination on the grounds of colour, race, gender, nationality or national origin, marital status, disability, sexual orientation, age, religious belief or because they are living with HIV/AIDS or have a previous criminal conviction which is legally "spent" in respect of employment and service provision, unless an objective and/or lawful reason(s) prevail(s). Further details of the Council's Equal Opportunities Policy and service statements are available on request.

EQUAL OPPORTUNITIES DATA – This sheet will be removed from your application form before shortlisting and we will only use it to help us monitor equal opportunities.

Job Title _____ Post No _____

Where did you see this vacancy advertised?

Gender and Marital Status

My gender is :- Female Male

My marital status is :- Married Unmarried

What is your age range

| | |
|-------------|--------------------------|
| 25 or under | <input type="checkbox"/> |
| 26 – 45 | <input type="checkbox"/> |
| 46 – 55 | <input type="checkbox"/> |
| 56 or over | <input type="checkbox"/> |

| | | | |
|--------------------------------|------------------------------|----------------------------|-------------------------|
| Ethnic Origin | | (please tick one box only) | |
| White: | British | <input type="checkbox"/> | |
| | Irish | <input type="checkbox"/> | |
| | Any other white background | <input type="checkbox"/> | (please write in _____) |
| Mixed: | White and Black Caribbean | <input type="checkbox"/> | |
| | White and Black African | <input type="checkbox"/> | |
| | White and Asian | <input type="checkbox"/> | |
| | Any other mixed background | <input type="checkbox"/> | (please write in _____) |
| Asian or Asian British: | Indian | <input type="checkbox"/> | |
| | Pakistani | <input type="checkbox"/> | |
| | Bangladeshi | <input type="checkbox"/> | |
| | Any other Asian background | <input type="checkbox"/> | (please write in _____) |
| Black or Black British: | Caribbean | <input type="checkbox"/> | |
| | African | <input type="checkbox"/> | |
| | Any other African background | <input type="checkbox"/> | (please write in _____) |
| Chinese or other ethnic group: | Chinese | <input type="checkbox"/> | |
| | Other | <input type="checkbox"/> | (please write in _____) |

DEFINITION OF DISABILITY

The Equality Act 2010 defines a disability as: "A physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day to day activities". This includes impairments, lasting at least 12 months or likely to recur, to one or more of the following:

- | | |
|---|---|
| • Mobility | • Manual dexterity |
| • Physical co-ordination | • Continence |
| • Ability to carry, lift or otherwise move everyday objects | • Perception of risk or danger |
| • Memory or ability to concentrate, learn or understand | • Speech, hearing or sight (not where sight is corrected by wearing spectacles or contact lenses) |

The term impairment includes progressive conditions. Some examples of impairments or long term conditions which could be considered as a disability under this definition are set out below. It is intended as a guide and is not an exhaustive list:

| | | |
|-------------------------------|---|---------------------------------------|
| Heart/circulation complaints | Epilepsy | Crohn's Disease |
| Limited physical mobility | Arthritis | Severe allergies |
| Long term back/neck problems | Clinical depression (and some other mental illnesses) | Impairment to hearing speech or sight |
| Upper limb disorders (eg RSI) | Diabetes | Schizophrenia |
| Multiple Sclerosis | Muscular Dystrophy | Manic depressive illness |

Please note: People with HIV, cancer and multiple sclerosis (MS) will be deemed to be covered by the DDA effectively from the point of diagnosis.

Disability

Do you consider yourself to have a disability in accordance with the Equality Act 2010?
 Yes No

APPLICATION FORM

Please read the guidance notes on the first page before completing this part.

- **Section 1 - Job details**

| |
|----------------------------|
| Job Title and Post Number: |
|----------------------------|

- **Section 2 - Personal Details**

| | | |
|----------------------------|--------------------------------|------------|
| Title: (Mr/Mrs/Ms/Miss) | Surname: Previous Surnames: | Forenames: |
|----------------------------|--------------------------------|------------|

| | | |
|---|------------------------|--|
| Home Address: Post Code: | National Insurance No: | Contact details: Home: Work: Mobile: e-mail: May we contact you at work? Yes / No |
|---|------------------------|--|

- **Section 3 - Employment history**

| Current or last employment | | | | |
|--|-----------|------|----|--------------------|
| Name & address of employer | Job Title | from | to | Reason for leaving |
| Brief Description of Main Functions and Responsibilities | | | | |
| Salary and other benefits | | | | |
| Length of notice required | | | | |

Previous employment (most recent first). Account for any breaks in your employment since you left school

| Name & address of employer | Post held | from | to | Reason for leaving |
|--|-----------|------|----|--------------------|
| (continue on final sheet if necessary) | | | | |

Do you need a work permit to work in the UK? Yes No

If yes do you have one? Yes No

• **Section 4 - Education and Training**

Secondary schools, colleges, university, etc attended

| Name & address | from | to | Examinations passed |
|---|------|----|---------------------|
| (continue on separate sheet if necessary) | | | |

Other relevant training courses (within and outside work)

| Course subject or title | from | to | Source or provider |
|---|------|----|--------------------|
| (continue on separate sheet if necessary) | | | |

Please give details of continuous skill/professional development. Please include details of additional qualifications gained and/or membership of professional associations

(continue on separate sheet if necessary)

Do you have a full valid driving licence

Yes

No

- **Section 5 - Supporting information and comments**

Please provide any other information in support of your application, ensuring that you address all the requirements of the Person Specification in the order given. Give evidence of relevant examples from work or in a voluntary capacity.

• **Section 6 – Criminal Convictions and Relationships**

Do you have any criminal convictions which are deemed unspent under the Rehabilitation of Offenders Act 1974? (Please see separate guidance note attached). Yes No
 If yes, please give details :- (offence, date of conviction, outcome)

Previous surnames/other names known by:

NB – If you are successful in your application and you are applying for a job that provides substantial access to children and/or other vulnerable groups you will be required to apply for a standard or enhanced disclosure barring service prior to appointment (level subject to post)

Are you related to a Councillor or employee of Uttlesford District Council? Yes No
 If yes, please specify the relationship :-

If you try to influence councillors or officers about this application we will disqualify you.

- **Section 7 – References** Referees should be your current and previous employers. Please refer to the Guidance notes, point 5 for other circumstances.

Please give the names and addresses of two referees. References will be taken up once a verbal offer has been made. **Please tick the box below if you do not want us to get in contact with your referee.**

| | |
|--|--|
| Name: <input type="checkbox"/> Work Relationship: Our preferred method of contact is via e-mail: Email: Address: Tel: | Name: <input type="checkbox"/> Work Relationship: Our preferred method of contact is via e-mail: Email: Address: Tel: |
|--|--|

Data Protection Act 1998. The Council is registered under the Data Protection Act 1998. Some or all of the above data may be held on a database or relevant filing system. Any data held will be fairly and lawfully managed and processed for relevant personnel purposes and we will ensure the details are adequate, relevant, accurate, confidential and secure. Any processing will comply with the regulations and afford you your rights under legislation.
 By completing and signing this document we note you are giving permission for the data to be so used by Uttlesford District Council.

Declaration

I understand that Uttlesford District Council has a duty to protect the public funds it administers and may use the information I have given on this form to prevent and detect fraud. The Council may also share this information with other organisations that administer public funds, for these purposes. I confirm that to the best of my knowledge the information I have given above and in any document(s) I have sent with my application is correct. I understand that if I have given any false or misleading information this may be treated as gross misconduct and I may be dismissed without notice.

Signature Date