



LEOMINSTER TOWN COUNCIL

Application No:

Application Form

Position applied for:

Closing Date:

Where did you see the vacancy advertised?

PERSONAL INFORMATION

Title:

First name:

Surname:

Address including postcode:

Telephone:

Email:

Do you hold a current clean driving licence?

Yes____

No____

Do you consider yourself to have a disability within the terms of the Disability Discrimination Act 1995?

Yes____

No____

Do you require a work permit to take up employment in the UK?

Yes____

No____

Do you have a close personal relationship with a councillor of the Parish Council or any other person that may present a potential conflict of interest?

Yes____

No____

If yes, please provide us with their details:

Name:

Position:

Relationship:

(This is to ensure that, as appropriate, the individuals involved are protected from allegations such as propriety, bias, or conflict of interest whether during the selection process or on any subsequent appointment.)

EMPLOYMENT HISTORY

Please list all employment in reverse chronological order, starting with your present or last position. Please continue on a separate sheet if you need to. You can include any voluntary or unpaid work that you may have done.

Date from/to	Position held/ duties	Name and address of employer	Reason for leaving

Education and qualifications

Date from/to	Name of School, College or University	Qualifications gained

Professional Training courses

Date achieved	Organising body	Description

Please give your reasons for applying for this position. Include examples of how you have demonstrated that your skills and experience fit with the person specification and job description.

Please use a separate sheet if necessary.

Please give details of any outside interests or other information which you feel will support your application.

Include here memberships of professional bodies and service on voluntary organisations etc.

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REFERENCES

Please give the names and addresses of two referees. One should be your present or last employer if possible.

Referee 1	Referee 2
Name:	Name:
Job title:	Job title:
Relationship to you:	Relationship to you:
Address:	Address:
Email:	Email:
May we approach them now? Yes_____ No_____	May we approach them now? Yes_____ No_____

DECLARATION

I declare that the information I am giving in this application is accurate and true. I understand that providing misleading or false information may disqualify me from appointment or may result in my dismissal.	
Signature	Date

Please return your completed application to The Environmental Services Supervisor, Leominster Town Council, 11 Corn Square, Leominster, Herefordshire HR6 8YP. Electronic applications will be accepted and can be sent to grounds@leominstertowncouncil.gov.uk