ADDOINT AFNIT OF D	wish Claule
APPOINTMENT OF: Pa	n equal opportunities employer and your application will be judged
solely on merit. Please and sign the declaration provide the best chance	e answer all the questions in this form honestly and truthfully and read on and consent under the Data Protection Act at the end of the form to ce of obtaining an interview. If you require any assistance, please erk, Margaret Carey on 01225742356 or clerk@boxparishcouncil.gov.uk
Please complete the focontinuation sheets.	orm in full in black ink or type and use only A4 size paper for
YOUR DETAILS	
First Name	
Last Name	
Address:	
Post Code	
Contact telephone	
Contact email	
	AND NON-VOCATIONAL EXPERIENCE any personal interests or non-vocational experience which you feel will on.
	S

Box Parish Council – Job Application Form – Applicant Name:

EDUCATION AND QUALIFICATION Please give details of your education		fications obtain	ad plus those currently being
pursued.	ation and quain	ications obtain	ed plus those currently being
Place of study /	Dates		Subjects & Qualifications
Awarding Body	Start	End	
<u> </u>			
Please note that you will be ask	ced to produce 6	evidence of you	r qualifications.
PROFESSIONAL INSTITUTE MEN		,	·
Please give details of any releva		or technical ho	dies of which you are a
member.	ine professional	or teermiear so	ares or writeri you are a
Institute/Professional Body	Level of M	embership	Year of Award
,			
TRAINING COURSES			
Please give details of any releva			
Government training schemes			
Course Title and Duration	Pro\	vider	Date

Box Parish Council – Job Application Form – Applicant Name:\_\_\_\_\_

CURRENT OR MOST RECENT EMPLOYMENT	
Employer:	
Address:	
Post Code:	
Job Title:	
Current or Final Salary:	
Date Commenced:	
Leaving Date or Notice Period Required:	
Please provide a brief description of the ma most recent job. (Please attach a copy of the job description	in duties and responsibilities of your current or
(rease attach a copy of the job description	n yeu wishij.
Why do you/did you wish to leave your curr	ent/most recent job?

Box Parish Council – Job Application Form – Applicant Name:\_\_\_\_\_

EMPLOYMENT HISTORY				
Please list your previous employment history in chronological order using a separate sheet if				
necessary and please give reasons for any gaps in your employment history.				
Employer	Employme	ent Period	Job Title and Main	Reason for Leaving
Name & Address	Start	End	Responsibilities	
RELEVANT SKILLS, EXPE	RIENCE AND	KNOWLED	GE	
•			or this post and the expe	erience, skills and
knowledge you have wh			·	,
<u> </u>		•	sure you cover all the cr	riteria set out for this
job role.				
This should include information about any period not accounted for in the section above by				
full time employment or education and training and, if appropriate, voluntary work.				
Please use a separate sheet if necessary and/or attach any supporting documents.				
rease ase a separate sheet if necessary analyof attach any supporting abeaments.				

Box Parish Council – Job Application Form – Applicant Name:\_\_

## PREVENTION OF ILLEGAL WORKING

Do you require permission or a work permit to take up employment in the UK? Yes / No

The Council has legal obligations to ensure that you can work legally in the UK. Prior to taking up any employment you will be required to provide evidence of a passport and/or other relevant documents on the approved list to satisfy the Council that you comply with this requirement.

Box Parish Council – Job Application Form – Applicant Name:			
REHABILITATION OF OFFENCERS ACT 1974 Please give details of any "unspent" convictions as def Act 1974. Unless the nature of the position allows the entire criminal record we will only ask about "unspent A criminal record will not necessarily be a bar to obtain	Council to ask questions about your "convictions."		
DRIVING LICENCE			
Do you hold a current driving licence?	Yes / No		
If "yes" please state they type of licence you hold:	,		
Are you a car owner or do you have access to a car?	Yes / No		
Do you have any current endorsements?	Yes / No		
If "yes" please specify:			
Please give details of two persons who we could contareference for you. We would prefer your referees to be including your current employer, if applicable. Referer authenticity checked if you are to be offered the apport	nces will be obtained and their		
Name			
Position			
Contact Email			
Contact Telephone			
Name			
Position			
Contact Email			
Contact Telephone			
Are you, to your knowledge, related to or have any related to or hav	ationship with a member or employee		
of the Council?	Yes / No		
If "yes", please give details			

knowledge and understand I also understand that if the will be sufficient grounds fo employment gained. I understand that the inform the purpose of considering application this form and the time as I am an employee and the standard stand	ng details given in this applicati that verification checks may be information I have given is four r disqualification from appointr nation given in this form will be my application for employment e information in it will be retain nd for up to six years after the e	made.  nd to be untrue or misleading this  ment or dismissal from any  processed only be the Council for
Signed:		Date:
NOTIFICATION OF VACANCY	,	Date
How did you find out about		
Advertisement – where?		
Word of mouth – who?		
Other (please state)		
ACKNOWLEDGEMENT AND	RETURN OF COMPLETED FORM	1
Completed application must	t be received by us before:- <b>7</b> <sup>th</sup> .	April 2025
Email your completed form	to clerk@boxparishcouncil.gov	.uk
INTERVIEW ARRANGEMENT		till itt ik aoth a stoogs
It is our intention that if you	are selected for interview, you	will be notified <b>by 10<sup>th</sup> April 2025</b>
Interviews will be held during	ng week commencing	22 <sup>nd</sup> April 2025
If selected for interview, wil	l you be available during w/c 2	2 <sup>nd</sup> April 2025 Yes / No

Box Parish Council – Job Application Form – Applicant Name:

Thank you for applying!