



DORCHESTER TOWN COUNCIL JOB APPLICATION FORM

Please complete in black ink and return to the address on the back page either by e-mail or post

Please do not use staples for additional information sheets of paper
All the sections of this form should be completed

VACANCY DETAILS

Job: Skilled Gardener	Closing Date: Noon 5th July 2024
Where did you see the advertisement?	

PERSONAL DETAILS

Surname:		First Names:	
Home Address:		Telephone Numbers/E-mail addresses:	
		Private:	
		Work:	
		Mobile:	
		E-mail:	
Postcode:		Can we contact you at work? YES / NO	
NI Number:	Preferred Title:	Valid Driving Licence: YES / NO / PROV	
		Penalty Points: YES / NO	
		Car Owner: YES / NO	

Are you related to (or are you the spouse/partner of) any employee of Dorchester Town Council? **YES / NO**
If yes please give details:

Canvassing will disqualify your application or make you liable to dismissal if appointed.

EDUCATION AND TRAINING

From	To	Schools, Colleges, University, etc attended (latest first)	Qualifications attained (with grades)

MEMBERSHIP OF PROFESSIONAL INSTITUTIONS

Organisation	Membership Status	Date Awarded

EMPLOYMENT HISTORY (most recent jobs first)

Please indicate all previous positions held (including any with this Council) **starting with the most recent.**

Present Position:		Present Employer:	
		Location:	
Date Started:	Current Salary: Benefits:	Reason for wishing to leave:	

From	To	Previous Positions	Employer and Location	Reason for Leaving

NOTICE

Please state the period of notice you are required to give to your present employer:

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REFERENCES

Please provide two referees with knowledge of your work / character. One must be your current or most recent employer. If you have worked for your current employer for less than 6 months please attach another referee's name who must be a previous employer. If one of your referees is a personal one the referee should not be related to you in any way. References will be taken up in confidence.

a) Employer

Name

Job Title

Address

.....

Phone E-mail

Can we contact this referee prior to interview? YES / NO

b) Other referee

Name Relationship to you

Job Title

Address

.....

Phone E-mail

Can we contact this referee prior to interview? YES / NO

SPARE TIME ACTIVITIES

ADDITIONAL INFORMATION

Please give details of any convictions other than those which are 'spent' under the provisions of the Rehabilitation of Offenders Act 1974. Failure to disclose such convictions could result in dismissal. Any information given will be treated in the strictest confidence.

MEDICAL INFORMATION

Please state how many days sickness absence you have taken in the last 2 years, giving reasons. This also applies to periods of unemployment when you would have been unfit for work.

1. I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.
2. I understand that the Council reserves the right to require me to undergo a medical examination. (Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law requires us to inform you of our intention and obtain your permission prior to contacting your doctor). I understand that this information will be retained in my personnel file during employment and for up to six years thereafter and understand that information will be processed in accordance with the Data Protection Act 1998 and I give my consent to this. Data may therefore be passed to other members or officers of the Council who require my information for legitimate business purposes.
3. I agree that should I be successful in this application, I will, if required, apply to the Criminal Records Bureau/Disclosure Scotland for a basic disclosure. I understand that should I fail to do so, or should the disclosure not be to the satisfaction of the Council any offer of employment may be withdrawn or my employment terminated.

Signed

Date

Completed applications should be sent to:

The Town Clerk, Dorchester Town Council, 19 North Square, Dorchester, Dorset. DT1 1JF

or: E-mail: admin@dorchester-tc.gov.uk