7. Application Form

CLOSING DATE: 12 Noon Monday 26th July 2021

Position applied for:	How did you hear about this vacancy?
Surname:	Initials:
Address:	Telephone:
	Mobile:
	Email:
	National Insurance Number:
Uppingham Town Council Privacy Policy & Information About Personal Data	

Personal Details

Personal Details:		
Do you require a work permit to take up employment in the UK?	Yes/No	
Are you legally eligible for employment in the UK?	Yes/No	
Please give details of any unspent criminal convictions that you may have (in accordance with the Rehabilitation of Offenders Act 1974).		
If offered this post will you continue to work in any other capacity? Yes/No		
If so, please give details.		
Have you previously worked for this Council? Yes / No If YES, please give details of position held, dates of employment and main responsibilities:		

Hobbies		
What do you like to do in your spare time?		
Disabilities		
Do you consider yourself to have any disabilities? If yes, please give details (this will enable the Council to make reasonable adjustments to help accommodate you):		
You and this role: Additional Information		
Please include specific examples, where appropriate, in response to the following questions:		
What is your reason for applying for this position?		
What are the skills and personal qualities you would bring to the role?		
What experience do you have of working effectively as a member of a team?		
Please give an example of when you have led a team successfully.		
Please give an example of how you have dealt with a work-based crisis or challenging situation.		
Please describe an occasion where you have improved a business process or Council procedures. What did you do and what was the outcome?		

Please give details of any other information you feel will support your application:		
References		
Please give the names and addresses of two referees. On	e should be your present or last employer if possible.	
Referee 1	Referee 2	
Name	Name	
Address	Address	
Address	Address	
The above will only be requested for the successful candid	date.	
Are you related to any employee or Elected Member of t	his Council? Yes/No	
If yes, please give full details:		
, ,,		
IMPORTANT NOTICE		
Failure to answer all the questions on this application or decision on whether or not to employ you will autor		
employment, and where employment has commenced, t	, , ,	
DECLARATION		
I the undersigned declare that the information given	by me on this application and any other form (including at	
	that I have not knowingly withheld any fact or circumstance	
which, if disclosed, would influence a decision to emplo	y or not employ me.	
Signature	Date	