



Office use only: REFERENCE NO.

JOB APPLICATION FORM – SECTION A

Section A will be separated from **Section B** before shortlisting and is not seen by anyone involved in the selection process. The shortlisting panel will make their decisions based on Section B without access to personal information. Please complete this form as a word document and send it as an attachment to clerk@perranzabuloe-pc.gov.uk

Job applied for: **Beach Warden**

YOUR PERSONAL DETAILS (Please print to ensure details can be read easily)

Title: (Mr / Mrs / Miss / Ms / Dr)	First Names:
Surname:	
Current Address:	
Postcode:	
	Contact details
	Home Telephone no:
	Mobile:
	E-mail:
	Business number (if we can contact you at work):

REFERENCES

Please provide the names and addresses of two referees who can comment on your suitability for this job. The Guidance Notes provide detailed information, but please note that one reference must be your current or most recent employer. Do not use friends or relatives.

1. Name		2. Name	
Position		Position	
Relationship to applicant		Relationship to applicant	
Address:		Address:	
Postcode:		Postcode:	
Tel no:		Tel no:	
Email:		Email:	

Are you happy for us to take up your references before interview? Yes No

ADDITIONAL INFORMATION REQUIRED

Please give details of any 'unspent' convictions as defined in the Rehabilitation of Offenders Act 1974. Unless the nature of the position allows Perranzabuloe Parish Council's interviewing managers to ask questions about an entire criminal record we only ask about 'unspent' convictions. A criminal record will not necessarily be a bar to obtaining a position at the Council.

Are you related to a Councillor, or employee, of the Perranzabuloe Parish Council? If yes, please provide their name and position below.	Yes	No
Have you worked for Perranzabuloe Parish Council or any other local authority via a Temporary Employment Agency within the last six months? If so, give details below.	Yes	No

Have you ever been dismissed from any previous employment? If yes, please indicate below which employment and specify the reasons for your dismissal.	Yes	No
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Have you received a redundancy payment or a pension from previous local authority employment? If yes, please state employer's name and month / year the payment or pension was received.	Yes	No
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If you have a disability, are there any arrangements we can make for you if you are called for an interview and / or an assessment centre? (eg ground floor venue, hearing loop, sign language interpreter, audio tape, etc.)

PLEASE NOTE THE FOLLOWING:

Canvassing of Members of the Council directly or indirectly for any appointment under the Council will disqualify the candidate concerned for that appointment. A candidate who fails to disclose any relationship with a Member or employee of the Council, or deliberately supplies information which they know to be false, will be disqualified for the appointment and if appointed, will be liable to dismissal without notice.

In accordance with GDPR all information given on this application form will only be used to determine an applicant's suitability for the job and will be kept only for those purposes and equal opportunities monitoring.

Application forms for unsuccessful candidates will be retained for a period of six months before being destroyed.

Please indicate how you heard about this vacancy

Parish Council web site Other
 Social Media