PRIVATE

App2(EAL) Rev. 11/01



Application for Employment

Equal opportunities will be afforded to all job applicants in all stages of the recruitment process. Appointment will be based solely on merit and without regard to issues of race, colour, ethnic, or national origins, sex, religion, marital status, sexual orientation or disability. **Thank you for your application.**

| L | • | * verithi | Vacancy Number n Devon County Council (Delete if applicable) |
|--|------------------------|----------------------------------|--|
| | | envelope to | |
| you have any questions al ly name is | | | on |
| | | | |
| SECTION 1: YO | U | | |
| First name(s) | | | |
| Last name | | | |
| Address | | | |
| | | | |
| Postcode | | | |
| Daytime telephone numbe | r (including STD code) | | |
| | | | |
| Evering telephone number | (including STD code) | | |
| SECTION 2: WO |)RK | | |
| | | | |
| Please start with your curre If you are employed by De redeployment situation. | | | what department and tell us if you are in a |
| If you are employed by De | | | what department and tell us if you are in a Reason for leaving: |
| If you are employed by De redeployment situation. Name and address of | von County Council at | the moment, please say in Dates | · · · |
| If you are employed by De redeployment situation. Name and address of | von County Council at | the moment, please say in Dates | · · · |
| If you are employed by De redeployment situation. Name and address of | von County Council at | the moment, please say in Dates | · · · |
| If you are employed by De redeployment situation. Name and address of | von County Council at | the moment, please say in Dates | · · · |
| If you are employed by De redeployment situation. Name and address of employer: | Job/title: | the moment, please say in Dates | Reason for leaving: |
| If you are employed by Deredeployment situation. Name and address of employer: | Job/title: | Dates (month/year): | Reason for leaving: |

SECTION 3: TRAINING AND QUALIFICATIONS

Please tell us about any training you have been on and any qualifications* you have (for example, short courses, first aid, languages, computer skills, work-based NVQ etc.). We are only interested in things that are relevant to the job you have applied for.

| applied for. | |
|--|------|
| Course or qualification | Date |
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| SECTION 4: WHY ELSE ARE YOU SUITABLE FOR TO Please use this space to tell us anything else about you which shows that you are suitable hobbies or interests. | |
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| SECTION 5: OTHER INFORMATION | | | | | |
|---|--|--|--|--|--|
| Are there any times when you are not able to work? | | | | | |
| | | | | | |
| Do you require a work permit? Yes \(\square\) No [| | | | | |
| Are you related to a Member or Senior Officer of the Council* | Yes No | | | | |
| (If yes, please tell us the name of the person and tell us what yo | our relationship to them is) | | | | |
| Do you, your partner or family have any interests (financial, pro Council employment?* | fessional or otherwise) that may conflict with your Devon County | | | | |
| Yes ☐ No [| | | | | |
| *Failure to tell us this information may disqualify you from the po | ost. | | | | |
| SECTION 6: REFERENCES | | | | | |
| Please give details of two named referees covering the last 5 year relative. Personal referees must be able to comment on your sk may also be sought from previous employers, particularly for po | cills and abilities in relation to the post. Additional references | | | | |
| First Referee | Second Referee | | | | |
| This should be your current or most recent employer if possible. | This should be a recent employer if possible. | | | | |
| Name: | Name: | | | | |
| Address: | Address: | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Tel No: | Tel No: | | | | |
| Relationship: | Relationship: | | | | |
| How long have they known you? | How long have they known you? | | | | |
| | | | | | |

If you are shortlisted, we will contact your referees before the interview unless you tick this box

| SECTION 7: DISA | BILITY | | | | |
|--|--|---|--|--|---|
| Devon County Council welcon defines a person as having a c adverse effect on his or her ab | disability if he or sh | he "has a physic | cal or mental impairm | | |
| Do you have a disability? | Yes 🗌 | No 🗌 | | | |
| Wherever possible and reasor the application and selection page one, or provide details be | rocess. If you req | amendments a uire assistance | and offer alternatives at any stage of the p | to help a person with a rocess please phone th | disability through e number given on |
| | | | | | |
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| SECTION 8: REHA | BILITATIO | ON OF OF | FENDERS A | ст 1974 | |
| As this post meets the requirem applicants who are offered emp appointment is confirmed. This | loyment will be su | bject to a crimir | nal record check from | the Criminal Records | Bureau before the |
| A criminal record will not nece that are not relevant to the job | | appointment. S | Suitable applicants wi | Il not be refused jobs be | ecause of offences |
| Completed disclosure forms w month. Where an appeal has I | | | | | redded within one |
| Devon County Council has a p | olicy on the emplo | oyment of peop | le with criminal record | ds, which is available o | n request. |
| SECTION 9: DECL | ARATION | | | | |
| I declare that the information gives used for purposes registered by information is found to be inacc direct credit transfer to a Bank/B | ven in this applicat the Council unde urate this may lea | tion is, to the be or the Data Prote d to dismissal w | ection Act. I understa vithout notice. I unde | and that if, after appoint erstand that all payment | ment, any s will be made by |
| Signed: | | | Date: | | |
| | | | | | |

Thank you for applying to Devon County Council. Please return this completed form to us in the envelope provided.

DATA PROTECTION ACT

INFORMATION FROM THIS APPLICATION MAY BE PROCESSED BY COMPUTER FOR PURPOSES REGISTERED BY THE COUNTY COUNCIL UNDER THE DATA PROTECTION LEGISLATION. INDIVIDUALS HAVE THE RIGHT OF ACCESS TO COMPUTERISED PERSONAL DATA CONCERNING THEM.

DIVERSITY MONITORING

DEVON COUNTY COUNCIL BELIEVES IN VALUING DIVERSITY. WE WELCOME AND ENCOURAGE APPLICATIONS REGARDLESS OF AGE, GENDER, SEXUAL ORIENTATION, RACE, RELIGION OR DISABILITY. TO HELP US MONITOR THE EFFECTIVENESS OF OUR POLICIES WE WOULD ASK YOU TO CLICK HERE TO SAVE YOUR APPLICATION AND THEN COMPLETE THE DIVERSITY MONITORING INFORMATION.

FOR OFFICE USE ONLY

| Directorate | Closing date | 1 | 1 |
|-------------|----------------|-----|----|
| Post | Acknowledged | 1 | 1 |
| | Shortlisted | Yes | No |
| Grade | Interview date | 1 | 1 |
| Location | Appointed | Yes | No |
| | Start date | / | / |