



EMPLOYMENT APPLICATION FORM

Position applied for:	
Vacancy Reference:	
PERSONAL DETAILS	
Title:	
Surname:	
First Name(s):	
Previous Names(s):	
Address:	
Preferred Telephone contact(s):	
Email address:	
EDUCATION AND QUALIFICATIONS	
Name of School/college/university:	
Qualifications and Grades:	
Date Attained:	
Attended from:	
Attended to:	

Please copy and paste to continue inputting all your Education and Qualification details

TRAINING AND MEMBERSHIPS

Name:	
Membership/Grade:	
Date Joined/attained:	
Examination taken?:	

Please copy and paste to continue inputting all your Training and Membership details

EMPLOYMENT HISTORY

Start date:	
Is this your current job:	
End date:	
Notice Period:	
Employers name:	
Address:	
Job Title:	
Duties and Responsibilities:	
Reason for leaving:	

Please copy and paste to continue inputting all your Employment History details

SUPPORTING INFORMATION

Please describe experience relevant to this application. Include expertise gained		
both in and outside paid employment: e.g. your current or any other job, voluntary		
work, leisure interest, domestic work, study, etc. Please continue on a separate sheet if necessary.		
Sheet ii hecessary.		
Information provided in this part of your application should demonstrate how you meet the Person Specification for the post.		

REFERENCES

Please provide details of two referees who know you well enough to comment on your ability to do the job. One must be your current or most recent employer if you have been employed. Referees must not be members of your family.

Current or most recent employer	
Name:	
Position Held:	
Name of Organisation:	
Email address:	
Telephone number:	
Address:	
Capacity known:	
Second reference	
Name:	
Position Held:	
Name of Organisation:	
Email address:	
Telephone number:	
Address:	
Capacity known:	

DRIVING LICENCE

Do you hold a full UK driving licence?	
Please give details of any endorsements:	

FILTER QUESTIONS

Do you have the right to work in the UK?	
Have you ever lived at any address in the Eastbourne Borough or Lewes District boundaries? If yes, please provide the address/es and approximate dates of residence.	
Are you aware of any monies owed by yourself to either Eastbourne Borough or Lewes District Council? If yes, please provide the details of what it is in respect of (for example Council Tax, Overpaid Housing Benefit) and if you have a payment plan in place for repayment please provide the reference number.	
The Council's Code of Conduct states that we view failure to pay any money due to itself as likely to bring the council's own reputation into disrepute. It is for the council to demonstrate an individual's liability for any payment, and to institute recovery procedures. But any persistent failure to pay a legitimate demand presented in this connection will be dealt with within the framework of our agreed Disciplinary Procedure. All information gathered is treated in accordance with the Councils privacy notice.	

OTHER DETAILS

When are you available for an interview.	Please select from:
	Morning preferable
	Afternoon preferable
	Any
Please state any date(s) when you would be UNABLE to attend an interview. If you are invited for an interview, please give details of any special arrangements that you require	

CRIMINAL CONVICTIONS

Under the Rehabilitation of Offenders Act 1974 (Exceptions) order 1975 (as amended in 2013) Guidance and criteria on the filtering of these cautions and convictions can be found on the Disclosure & Barring Service Website www.gov.uk/organisations/disclosure-and-barring-service

Have you ever been convicted of a criminal offence in the past which has not become "spent" under the Rehabilitation of Offenders Act 1974?	YES / NO
Are you subject to pending criminal	YES / NO
prosecution or proceedings?	
Please give details of the nature of any	
"unspent" convictions or pending criminal	
convictions or pending criminal	
proceeding (not including minor traffic	
offences). If you are in doubt about your	
answer to the above question(s), ensure	
that you obtain clarification of your	
circumstances before making an	
application.	

The Council reserves the right to make a criminal record check in respect of job applications for appointment, or registration involving substantial access to children.

DECLARATION

By signing this form I declare that all the information set	Signature:
out in this application form is true in all respects and I	
understand that false information may render me liable	
for dismissal if I am appointed.	Date:
By signing this form and submitting this form I consent	Signature:
to processing sensitive personal I data relating to me for	
the purpose of managing my application, provided that	
such processing is in accordance with the Data	Date:
Protection Act 2018.	

RECRUITMENT/EQUALITIES MONITORING FORM

Position applied for:	
Vacancy Reference:	
DISABILITY DISCRIMINATION ACT	
Do you consider yourself to have a disabi	lity? YES / NO
DIVERSITY MONITORING	
To help us ensure that our equal opportuni complete this section or the monitoring form separately from the remainder of your applinvolved in short listing either during or after	n. The information provided is kept ication and is not seen by anyone
Age group:	Please select from:
	16-20
	21-25
	26-35
	36-45
	46-55
	56-59
	60 and over
Gender:	Please select from:
	Prefer not to say
	Male
	Female
	1
Ethnic Origin:	Please select from:
	Asian / Asian British
	Black / Black British

	Chinese
	Other
	White
	Mixed
	Prefer not to say
	Arab
Religion:	Please select from:
	Buddhist
	Christian
	Hindu
	Jewish
	Muslim
	Sikh
	No Religion
	Other
	Prefer not to say
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Sexual Orientation:	Please select from:
	Bi/Bisexual
	Gay Man
	Heterosexual/Straight
	Prefer not to say

Please return your completed application form to recruitment@lewes-eastbourne.gov.uk

Gay woman/Lesbian