

Application form Wells City Council

Position applied for	Portway Annexe Cleaner
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How did you hear about this position?	
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Personal Details

Title			
Surname			
Forenames			
Address			
Postcode			
Phone Numbers	Home		
	Work		
	Mobile		
Email address		NI Number	

Please state any special requirements needed, either at your interview or in your place of work	

Eligibility to work in the UK (for completion by non-EU nationals only)

Do you need a work permit?	YES / NO
If yes, do you have a work permit?	
What type is it?	
Please state number	

Education

Establishment	From	To	Qualifications Gained

Technical or Occupational Training (Proof of achievement may be required)

Establishment	From	To	Status or Qualifications Gained

Other Relevant Training Courses attended

Employment History

Please list below full details of your employment history starting with your **current** or **last** employer, working backwards to your first employer. If necessary, please insert additional boxes.

Name of employer	
Dates of employment	
Position and main duties	

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Gaps in work history

Please give details of any time not already accounted for (including voluntary work and unemployment)	

Other Details

Please state your leisure activities including any clubs or associations to which you belong	

Availability

Please indicate your availability to take up this post if you were to be appointed ie. date/notice period required for current employer	
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Suitability

Please provide evidence of how your skills and experience relate to the position.
This evidence should include examples, where appropriate, from your current or previous experience.
Please answer fully as this information will be used to shortlist candidates for interview.

References

Three references are required for external candidates. One referee should be your current employer or if you are currently not working, your last employer. Please indicate the context of your association with each referee.

	Reference 1	Reference 2	Reference 3
Name			
Job Title			
Company			
Relationship			
Address			
Post Code			
Tel. No			
Fax No			
E-mail			

I certify that, to the best of my belief, the information I have provided is true and I understand that any false information may, in the event of employment, result in dismissal or disciplinary action.

Signed

Dated

The information you have provided will be handled and processed in accordance with the Data Protection Act 1998. If you are appointed, the information will form part of your personnel record. If you are not appointed, the form will be shredded within 6 months.

Email completed application to townclerk@wells.gov.uk

**Or Send to: Haylee Wilkins, Town Clerk
Town Hall Market Place, Wells, Somerset BA5 2RB**