**FOR OFFICE USE ONLY**

Applicant No.:

Interview Time:

A black and gold tower with a clock

Description automatically generated

**APPLICATION FOR EMPLOYMENT**

**POST TITLE: PROJECTS & STRATEGY OFFICER**

**PERSONAL DETAILS**

|  |  |  |
| --- | --- | --- |
| **Title:** | **Forename(s):** | **Surname:** |
| **Address:** | | **Telephone Number (home):** |
|  | | **Mobile Phone Number:** |
|  | | **Email Address:** |
|  | |  |
|  | |  |

**REFERENCES**

Please give details of people preferably known to you in a professional capacity, and where possible to include your present or more recent employer.

|  |  |
| --- | --- |
| **Name:** | **Name:** |
| **Position:** | **Position:** |
| **Relationship to you:** | **Relationship to you:** |
| **Organisation/Company:** | **Organisation/Company:** |
| **Address and Postcode:** | **Address and Postcode:** |
| **Telephone Number:** | **Telephone Number:** |
| **Email Address:** | **Email Address:** |
| **Length of time you have known this person:** | **Length of time you have known this person:** |
| **May we contact this referee before interview?** | **May we contact this referee before interview?** |

**RELATIONSHIPS/CANVASSING**

|  |
| --- |
| Are you the parent, grandparent, spouse, partner, child, step-child, adopted child, grandchild, brother, sister, uncle, aunt, nephew or niece of any Member (Councillor) or member of staff of Newton Abbot Town Council, or the partner of such persons? If yes, please state to whom and the nature of the relationship. Please note that seeking support of any Councillor for your application, directly or indirectly, will disqualify your application. |

**SECONDARY AND FURTHER EDUCATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **School/College/University** | **From** | **To** | **Qualifications gained** | **Grades** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**PROFESSIONAL QUALIFICATIONS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Awarding Body** | **Qualification** | **How obtained**  **(examination, election etc).** | **Date** |
|  |  |  |  |
|  |  |  |  |
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**MEMBERSHIP OF PROFESSIONAL BODIES**

|  |  |  |  |
| --- | --- | --- | --- |
| **Professional Body** | **Grade of Membership** | **How obtained**  **(examination, exemption etc)** | **Date** |
|  |  |  |  |

**OTHER RELEVANT TRAINING**

|  |  |  |
| --- | --- | --- |
| **Dates (from and to)** | **Training Provider** | **Nature of Training** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**PRESENT OR MOST RECENT EMPLOYMENT**

|  |  |  |
| --- | --- | --- |
| **Employer’s Name and address:** | **Job Title:** | **Date**  **Started:**  **Left:** |
| **Basic salary/wage:** | **Pay supplements:** | |
| **Additional allowances/benefits** | **Period of notice or date available to take up employment:** | |
| **Is this your only current job:** | | |
| **Reason for wishing to leave:** | | |
| **Brief outline of duties and responsibilities:** | | |

**PREVIOUS EMPLOYMENT (most recent first)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employer’s name and location** | **Position held and main duties** | **Dates** | | **Reason for leaving** |
| From | To |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**GAPS IN EMPLOYMENT HISTORY**

|  |
| --- |
| Please give reasons and dates. |
|  |

**RELEVANT KNOWLEDGE, SKILLS, EXPERIENCE, APTITUDE AND INTERESTS**

|  |
| --- |
| Please describe your knowledge, skills, experience, aptitude and interests relevant to this position, and mention any particular achievements. Please relate this to the requirements of the Job Description and Person Specification as far as possible. Continue on a separate sheet(s) if required. |
|  | |

**DRIVING LICENCE**

|  |
| --- |
| **Do you hold a full, current driving licence? Yes/No** |

|  |
| --- |
| **I confirm that the information I have provided is accurate and I have not omitted any significant information. I understand that any false statement could disqualify my application.**  ***Forms returned via email without a signature:* by submitting this form, applicants are agreeing to the statement above.**  **Signed: …………………………………………………………………………….**  **Date: ……………………………………………………………………………….** |

***Please return the completed form to:***

**Newton Abbot Town Council :** [**info@newtonabbot-tc.gov.uk**](mailto:info@newtonabbot-tc.gov.uk)

***Or send postal applications to:***

**FAO: Mr Phil Rowe, Town Clerk**

**Newton Abbot Town Council**

**Newton’s Place**

**Wolborough Street**

**Newton Abbot**

**Devon**

**TQ12 1JQ**

***The closing date for receipt of completed applications:***

***Noon, Wednesday 20th November 2024***