

Durham County Council

Job Application Form

Thank you, for downloading Durham County Council's Job Application Form.

This form should only be used to make applications for advertised Council jobs.

You are advised to save this form to your hard drive so it can be filled in at your own time and pace. To do this click on "**F**ile", then "**S**ave **A**s..." and finally click the **S**ave button (you can change the filename and location if you wish).

If you wish to fill in an application form by hand, you can print the Adobe Acrobat PDF file - found on the same page as the link to this document. Alternatively, phone the contact telephone number on the job you are interested in (see bottom of job page for details of this number) to receive an application form in the post.

How to submit Your Job Application Form

1. Please fill in the following pages remembering to save the document when finished.
2. When finished return to our website and select the job you are applying for
3. Click on the "**name and email**" link (under step 2) at the bottom of the page
4. Fill in your Full name
5. Attach this document in the appropriate space provided by clicking on the "**B**rowse" button and finding this document from your local hard drive
6. Submit the completed application form

Problems filling in this form or requests for other formats

If you have any queries or problems filling in this form and it isn't in the guidance notes document or you need this form in another format such as large print or Braille, then please:

Email us by visiting our website (www.durham.gov.uk) and selecting the "Contact Us" link at the top of the page

Telephone the Human Resources and Organisational Development, Workforce Planning Team on 0191 372 8364 or Fax us on 0191 383 4500 (outside the UK, please replace the first 0 with +44)

Equal Opportunities Monitoring Form

We are an equal opportunities employer and want to ensure that all applicants are considered solely on their merits. Therefore we need to check that decisions are not influenced by unfair or unlawful discrimination. To help us we should be grateful if you would complete this short questionnaire. You only need to answer if you feel happy to do so. Your answers will be treated with the utmost confidence and will only be used for statistical purposes.

1. Are you: ☐ Male ☐ Female

2. How old are you: ☐ Prefer not to say

3. Do you consider yourself to be a person with a disability?

This may include a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities. Long-standing means that it has lasted, or is likely to last, for over a year.

☐ Yes ☐ No ☐ Prefer not to say

4. What is your religion or belief?

| | | |
|---|-----------------------------------|--|
| <input type="checkbox"/> Christianity | <input type="checkbox"/> Judaism | <input type="checkbox"/> Baha'i |
| <input type="checkbox"/> Hinduism | <input type="checkbox"/> Sikhism | <input type="checkbox"/> No Religion |
| <input type="checkbox"/> Islam | <input type="checkbox"/> Buddhist | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Other – e.g. Humanist, Atheist, etc (Please state) | | |

5. How do you describe your sexuality?

| | | |
|--|--|--|
| <input type="checkbox"/> Heterosexual / Straight | <input type="checkbox"/> Bisexual | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Gay Man | <input type="checkbox"/> Gay Woman / Lesbian | |

6. Please describe your ethnic origin?

White

☐ British
☐ Irish
☐ Any other White background

Black or Black British

☐ Caribbean
☐ African
☐ Any other Black background

Arab or Middle Eastern

☐ Arab
☐ North African
☐ Any other Arab or Middle Eastern Background

Travelling Community

☐ Gypsy/Roma
☐ Traveller of Irish Descent
☐ Other member of the travelling community

Asian or Asian British

☐ Indian
☐ Pakistani
☐ Bangladeshi
☐ Chinese
☐ Any other Asian background

Mixed

☐ White & Black Caribbean
☐ White & Black African
☐ White & Asian
☐ Any other Mixed Background

Other ethnic groups: Please state

Prefer not to say

☐ Prefer not to say

7. What is your Relationship Status?

☐ Married/Civil Partnership ☐ Prefer not to say

Durham County Council Application Form

Strictly Confidential



Please read the Guidance Notes before completing this form

To be completed by the Applicant

Post Ref. No:

Post Title:

Service/Location:

Closing Date:

Surname:

Title:

Forename(s):

Date of Birth:

Address:

Telephone No: Home

Mobile:

Postcode:

Work (if convenient):

E-mail address:

Job Share

If this post is open to job share, do you wish to apply for this post in a job share capacity?

☐ Yes

☐ No

Please state where you saw the advertisement for this post.

☐ Durham County Council Website

☐ Evening Chronicle Newspaper

☐ Northern Echo Newspaper

☐ Vacancy Bulletin

☐ Specific Journal

☐ DCC Intranet

☐ Sector1 Website

☐ Jobcentreplus

☐ Fish4Jobs Website

☐ Advertiser Newspaper

☐ Northeastjobs

☐ Other

Do you consider yourself to be a person with a disability? This may include a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities. Long-term means that it has lasted, or is likely to last, for over a year. Applicants with disabilities will be invited for interview if they meet the essential criteria on the person specification.



☐ Yes

☐ No

☐ Prefer not to say

If you have answered yes please detail below any specific requirements to assist you with an interview and we will try to make the necessary arrangements.

Important Information

Criminal Convictions

If after reading the guidance notes you have any spent or unspent convictions to declare please either declare them here, or if you prefer, send details by post marked 'For the attention of the Lead Officer, in strict confidence - only to be opened by the addressee' stating the post title and post reference number.

Data Protection Statement

The Council is committed to confidentiality and complies with the Data Protection Act 1998. All information will be handled and stored sensitively and used only for its intended purpose.

Declaration

Under the Council's new constitution you are required to state in writing whether to the best of your belief you are the parent, grandparent, partner, child, step-child, adopted child, grandchild, brother, sister, uncle, aunt, nephew or niece of an existing Councillor or Officer of the Council; or of a partner of such persons.

Name

Relationship

Canvassing of Members of the Council or any Committee of the Council or any appointing officer directly or indirectly for any appointment with the Council is prohibited and shall, if deemed appropriate, disqualify the candidate for that appointment.

I have read the guidance notes including the information regarding Criminal Convictions and I declare that the information I have given is true in all respects. I understand that false information may render me liable for dismissal if I am appointed.

I agree to the above statement and will sign and date a copy of this application as a true record if I am invited for an interview:

Signature:

Date:

A Education**Secondary Education**

N.B. appointment will only be confirmed subject to receipt of official certificates in support of below.
(Please use continuation sheets if required)

| School attended | Qualifications | Subject | Date | Grade |
|-----------------|----------------|---------|------|-------|
| | | | | |

Further and Higher Education: Please include YT, apprenticeships etc.

| School, College or University | Qualifications | Subject | Date | Grade |
|-------------------------------|----------------|---------|------|-------|
| | | | | |

Technical or Professional Membership/Qualification:

| Institute | Grade of Membership | Year of Election | Registration Number | Expiry Date (if applicable) |
|-----------|---------------------|------------------|---------------------|-----------------------------|
| | | | | |

For Posts Requiring General Social Care Council Registration:

| Should your post require you to be registered with the General Social Care Council please quote your registration number and expiry | Registration Number | Expiry Date |
|---|---------------------|-------------|
| | | |

B Employment Details

Including Work Experience, Training Schemes e.g. YT, ET, New Deal

Present post / most recent post*:

(*If currently unemployed please give your most recent post with date of finish and reasons for this.)

| Name and address of Employer | Employer's Business | Date | | Grade and present salary |
|------------------------------|---------------------|------|----|--------------------------|
| | | From | To | |
| | | | | |

Do you have any additional employment which you intend to continue if appointed to this post?

If yes, please detail the nature of the work and the hours

Period of notice required or termination date

Reason for seeking new employment?

Person Specification:

Please use this section to demonstrate that you have the essential and where possible desirable experience, skills and knowledge as stated on the person specification of the post for which you are applying. Candidates who do not evidence that they meet the essential qualifications and experience listed on the person specification will not be shortlisted. (Please use continuation sheets if required).

C Full Employment History

Please provide **full** details of all previous posts you have held, including those with Durham County Council (if applicable) starting with the most recent first. You will also need to include any dates (if applicable) when you have not been in employment. (Please use continuation sheets if required).

| Name & Address of Employer | Appointment held/Grade &/or salary (if any) | Dates (dd/mm/yy) | | Reason for leaving |
|----------------------------|---|------------------|----|--------------------|
| | | From | To | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

D Referees

Give name, job title, relationship to referee and address of **TWO** people, who must know you well to whom a reference may be made. Referee 1 should be your present (or most recent) employer, or if you are a recent school leaver, should be the Head Teacher of your last school. Next of kin or immediate relatives should not be named as referees.

Please note that for positions in contact with children and vulnerable adults the Council has the right to seek references from any or all previous employers and line managers prior to interview.

| | |
|--|---|
| Referee 1 Name: | Referee 2 Name: |
| Job Title: | Job Title: |
| Relationship to Referee: | Relationship to Referee: |
| Address: | Address: |
| Post Code: | Post Code |
| Telephone No: | Telephone No: |
| E-mail: | E-mail: |
| This reference can be requested prior to interview: | This reference can be requested prior to interview: |
| N.B. Appointment will only be confirmed subject to satisfactory references. | |

E Additional Information

In this space provided can you detail any other additional skills information (not already detailed in section B) which is considered relevant to this post. This may include any particular skill and qualities, which will help us assess your suitability for this post. Please use continuation sheet if necessary.

F Continuation Sheet

Please use this space for any other details you could not complete in the rest of the application form

G Continuation Sheet

Please use this space for any other details you could not complete in the rest of the application form