

**EMPLOYMENT**

**CANDIDATE PACK**

**POST:** Works Manager

**REFERENCE:** FTC/ WORKS/ WM

**CLOSING DATE:** Sunday, 20th February 2022

 



**PERSONAL DETAILS**

|  |  |
| --- | --- |
| Post |  |
| Closing Date |  |
| Form No. |  |

*All sections of this form must be completed in* ***BLACK*** *ink or print.*

*THIS SHEET AND THE EQUAL OPPORTUNITIES MONITORING FORM WILL* ***NOT*** *FORM PART OF THE SHORTLISITNG PROCESS*

|  |
| --- |
| **PERSONAL DETAILS** |
| Surname |  | Forename |  | Title Mr/Mrs/Miss/Ms |
| Address |  |  |
|  |  |  |
| *(If this is a temporary address, please also give your usual home address)* | Email Address |  |  |
| Telephone No. Home |  |  Work |  |  |
| Mobile Telephone No. |  | National Insurance No. |  |  |
|  |

|  |
| --- |
| **REFERENCES** |
| Please give the names and addresses of TWO referees known to you personally, one of whom must be your present or most  |
| recent employer (if previous employers know you by another name, please state this) |  |
| Name |  |  | Name |  |  |
| Job Title |  |  | Job Title |  |  |
| Address |  |  | Address |  |  |
|  |  |  |  |  |  |
| County |  | Postcode |  | County |  | Postcode |  |
| Email Address |  | Email Address |  |
| May we contact this referee without further reference to you? | **YES / NO** | May we contact this referee without further reference to you? | **YES / NO** |

|  |
| --- |
| **DECLARATION** |
| I declare that the information set out in this application form is true in all aspects and that false information may render me liable for dismissal if I am appointed. |
| Signed |  | Date |  |  |
| ***The information on this form may be entered onto a computer and used for statistical, administrative and payroll purposes. Under terms and******Conditions of the DATA PROTECTION ACT 2018 the data will be treated in a secure and confidential manner and not kept for longer than necessary.*** |

**EQUAL OPPORTUNITIES MONITORING**

**This authority operates a policy of equal opportunities and wishes to ensure that all applicants are considered solely on their merits. Therefore, we need to be able to check that all decisions are not influenced by unfair or unlawful discrimination. To help us to do this, we would be grateful if you would complete this short questionnaire. Your answers will be treated with the utmost confidence and will be used for statistical purposes only.**

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**Gender** Man **[ ]**  Woman **[ ]**  Intersex **[ ]**  Non-binary **[ ]**  Prefer not to say **[ ]**

If you prefer to use your own term, please specify here

**Are you married or in a civil partnership?** Yes **[ ]**  No **[ ]**  Prefer not to say **[ ]**

**Age** 16-24 **[ ]**  25-29 **[ ]**  30-34 **[ ]**  35-39 **[ ]**  40-44 **[ ]**  45-49 **[ ]**

 50-54 **[ ]** 55-59 **[ ]**  60-64 **[ ]**  65+ **[ ]**  Prefer not to say **[ ]**

**What is your ethnicity?**

Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please tick the appropriate box

**White**

English **[ ]**  Welsh **[ ]** Scottish **[ ]** Northern Irish **[ ]** Irish **[ ]**

British **[ ]** Gypsy or Irish Traveller **[ ]** Prefer not to say **[ ]**

Any other white background, please write in:

**Mixed/multiple ethnic groups**

White and Black Caribbean **[ ]**  White and Black African **[ ]** White and Asian **[ ]**

Prefer not to say **[ ]**

Any other mixed background, please write in:

**Asian/Asian British**

Indian **[ ]**  Pakistani **[ ]** Bangladeshi **[ ]**  Chinese **[ ]**  Prefer not to say **[ ]**

Any other Asian background, please write in:

**Black/ African/ Caribbean/ Black British**

African **[ ]**  Caribbean **[ ]** Prefer not to say **[ ]**

Any other Black/African/Caribbean background, please write in:

**Other ethnic group**

Arab **[ ]**  Prefer not to say **[ ]**

Any other ethnic group, please write in:

**Do you consider yourself to have a disability or health condition?**

Yes **[ ]**  No **[ ]**  Prefer not to say **[ ]**

What is the effect or impact of your disability or health condition on your ability to give your best at work? Please write in here:

The information in this form is for monitoring purposes only. If you believe you need a ‘reasonable adjustment’, then please discuss this with your manager, or the manager running the recruitment process if you are a job applicant.

**What is your sexual orientation?**

Heterosexual **[ ]**  Gay **[ ]** Lesbian **[ ]**  Bisexual **[ ]** Prefer not to say **[ ]**

If you prefer to use your own term, please specify here:

**What is your religion or belief?**

No religion or belief **[ ]**  Buddhist **[ ]**  Christian **[ ]** Hindu **[ ]**  Jewish **[ ]**

Muslim **[ ]**  Sikh **[ ]** Prefer not to say **[ ]**

If other religion or belief, please write in:

**What is your current working pattern?**

Full-time **[ ]**  Part-time **[ ]** Prefer not to say **[ ]**

**What is your flexible working arrangement?**

None **[ ]**  Flexi-time **[ ]**  Staggered hours **[ ]**  Term-time hours **[ ]**

Annualised hours **[ ]**  Job-share **[ ]**  Flexible shifts **[ ]**  Compressed hours **[ ]**

Homeworking **[ ]**  Prefer not to say **[ ]**

If other, please write in:

**Do you have caring responsibilities? If yes, please tick all that apply**

None **[ ]**

Primary carer of a child/children (under 18) **[ ]**

Primary carer of disabled child/children **[ ]**

Primary carer of disabled adult (18 and over) **[ ]**

Primary carer of older person **[ ]**

Secondary carer (another person carries out the main caring role) **[ ]**

Prefer not to say **[ ]**



**CANDIDATE APPLICATION FORM**

|  |  |
| --- | --- |
| Post |  |
| Department |  |
| Closing Date |  |
| Form No. |  |

*All sections of this form must be completed in* ***black*** *ink or print .*

| **CURRENT OR MOST RECENT EMPLOYMENT** |
| --- |
| Post held |  |  |
|  | Name and address of employer |
| Date appointed |  |  |  |  |
| Salary / Grade |  |  |  |  |
| Notice required |  |  |  |  |
| Date of leaving (if applicable) |  |  |  |  |
| Reason for leaving |  |  |
|  |  |

| **DUTIES AND RESPONSIBILITIES** |
| --- |
| *Please include any relevant experience in respect of the post you are applying for.* |
|  |

*Continue on separate sheet if necessary*

| **PREVIOUS EMPLOYMENT** |
| --- |
| Please list most recent first |
| Name and address of Employers | Position held | Grade / Salary | DatesFrom - To | Reason for leaving |
|  |  |  |  |  |
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| **SUPPORTING INFORMATION / EXPERIENCE** |
| --- |
| *Any other experience or information in support of your application which is not detailed elsewhere in the application form.**Please show how you meet the criteria detailed in the Person Specification form.* |
|  |
|  |

*Continue on separate sheet if necessary.*

| **EDUCATION AND QUALIFICATIONS - SECONDARY EDUCATION** |
| --- |
| School / College | Subject | Qualification (eg GCSE, O/A Level) | Grade |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

| **EDUCATION AND QUALIFICATIONS - FURTHER EDUCATION** |
| --- |
| School / College | Subject | Qualification (eg A Level, Degree etc) | Grade |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

| **TECHNICAL OR PROFESSIONAL MEMBERSHIP / QUALIFICATION** |
| --- |
| Institute | Grade of Membership | Year of Election |
|  |  |  |
|  |  |  |

| **FURTHER TRAINING DEVELOPMENT** |
| --- |
|  |

*Continue on separate sheet if necessary)*

| **GENERAL HEALTH** |
| --- |
| How many days absence from work through illness have you had over the last two years? |  |
| How many periods of absence have you had in the last two years due to illness? |  |
| Please give the name, address and telephone number of your G.P. |
|  | Name |  |
|  | Address |  |
|  |  |  |
|  |  |  |
|  | Tel. No. |  |
|  |  |  |

| **OTHER INFORMATION** |
| --- |
| Do you possess a current driving licence? | **YES / NO** |  |
| If ‘yes’ do you have regular access to a car? | **YES / NO** |  |
| Where applicable |  |  |
| *If this application is in respect of a post requiring statutory registration or a professional qualification, successful candidates will be required to produce current registration certificates prior to commencement of employment.* |
|  |

| **RELATIVES AT FERRYHILL TOWN COUNCIL** |
| --- |
| Are you related to any Member or Senior Officer of this Authority? | **YES / NO** |
| If YES please give the names and state the relationship. Failure to disclose such a relationship may lead to your disqualification from appointment and, if appointed, may make you liable for dismissal. |
| Name |  | Relationship |  |  |
| Name |  | Relationship |  |  |
| Canvassing of members of the Council, any Committee of the Council, or Officers directly or indirectly for any appointment with the council is prohibited and shall disqualify the candidate for that appointment. |

| **DECLARATION** |
| --- |
| I certify that the information given on this form is true and correct to the best of my knowledge. I understand that the giving of false or misleading statements or withholding material or information may result in disciplinary action, including dismissal.I understand that if the post is one which has substantial access to children or vulnerable people, the Council have my permission to proceed with any relevant police checks.I understand that the appointment, if offered, will be subject to satisfactory medical clearance and references.Signature Date*The information on this form may be entered onto a computer and used for statistical, administrative and payroll purposes. Under terms and conditions of the DATA PROTECTION ACT 2018 the data will be treated in a secure and confidential manner and not kept for longer than necessary.* |

**APPLYING FOR A JOB**

Thank you for showing an interest in the vacancy we advertised. Before you fill in your application, please read the following notes. We hope you find them helpful.

Please do not send us a CV (career summary) as we will not be able to consider it. When filling in the application form, type or write clearly in **black** ink. This helps us with photocopying. In exceptional circumstances if you are unable to complete an application form a CV will be accepted. This must be agreed with the Town Clerk.

**If you have not been contacted with regard to your application within two weeks of the stated closing date, please assume that it has been unsuccessful.**

If you are posting your application, please check the cost of postage as some applications weigh more than the usual first or second class postage prices.

When applying for the post, please only return the following documents to enquiries@ferryhill.gov.uk or to the Town Clerk, Ferryhill Town Council, Town Hall, Ferryhill, County Durham, DL17 8JL, by the deadline date:

1. **Personal details sheet**
2. **Equal opportunities monitoring sheet**
3. **Candidate application form**
4. **Recruitment Questionnaire**

**Recruitment Timetable**

The selection process will involve a short listing of suitable candidates by Officers, and then a final interview with Officers. Short listed applicants will be notified by letter. The timetable is as follows

**Closing Date:** 20th February 2022

**Short listing:** Week commencing 28th February 2022

**Interview:** Week commencing 14th March 2022

If you have any queries on any aspect of the appointment process, or require additional information or merely wish to have an informal and confidential discussion, please contact the

Town Clerk on 01740 652157

For further information about Ferryhill Town Council, please visit the [Council’s website](http://www.ferryhill.gov.uk/) (www.ferryhill.gov.uk)

When we select for interview we use the following 3 documents to identify suitable candidates:

A) Job Description

B) Person Specification

C) Application Form

**JOB DESCRIPTION**

This tells you the main responsibilities of the job.

**PERSON SPECIFICATION**

This is the most important document which explains what we are looking for. It tells you what knowledge, experience and skills you need to do the job. We call these the ‘criteria’, which we use to make appointments.

**‘Essential’** criteria are those which you must have to successfully carry out the responsibilities of the job. The person specification should show you which criteria we will use to shortlist for the interview.

**‘Desirable’** criteria may be included. These are extra requirements which we may use if we receive too many forms which meet our ‘essential’ criteria.

You should ensure that in completing your application, you show how you meet these specific criteria.

**APPLICATION FORM**

If you want to apply for more than one job, please fill in a separate application for each job.

It is a good idea to make a rough draft first. Check through your draft to make sure that it is clear and that it covers all the criteria, before you fill in the form. Please give all the information you think we may need, as we cannot guess or assume anything about you.

**EDUCATION, QUALIFICATIONS AND TRAINING**

Be as comprehensive as possible. The advertisement will indicate if a qualification is essential for the role. All offers of employment are subject to proof of relevant professional qualifications and membership documents of any professional bodies. You may have gained further relevant knowledge, skills and abilities from other training opportunities, ensure that you make reference to this.

**EMPLOYMENT HISTORY**

Please give details of your current employer first and then details of previous employers, listing the most recent first.

**INFORMATION IN SUPPORT OF YOUR APPLICATION**

Please tell us anything you think is relevant to the job you are applying for. You will need to give us enough information so that we can judge whether you are suitable for the job.

For example, if the job requires experience of report writing, tell us about the type of reports you have written, the main contents and who the reports were for.

You may have relevant experience from activities outside work. This may show the things we are looking for just as much as any work experience. For example, you many have skills and experience from running a club or voluntary group.

**PERSONAL DETAILS**

You must complete this section. Please provide contact numbers.

**REFERENCES**

Please ensure that you give details of two referees with which we can confirm the information given with your application, as well as providing us with information relating to absence, disciplinary record and suitability for the position applied for. One of the references must be from your present or most recent employer and, if you are a recent school leaver, one should be the Head Teacher of your last school. It is the policy of the Authority to seek references prior to interview. If you have any objections to references being sought at this stage ensure you have made this clear on the form.

**DISCLOSURE & BARRING SERVICE CRIMINAL RECORDS CHECK**

If appropriate to the post, the successful applicant will be required to complete an enhanced disclosure check prior to commencement of employment, which will be organised and paid for by Ferryhill Town Council.

**EQUAL OPPORTUNITIES**

Please also complete and return the Equal Opportunities Recruitment Monitoring form. This enables Ferryhill Town Council to follow the recommendations of the Equal Opportunities Commission, the Commission for Racial Equality and the Disability Rights Commission, that employers should monitor selection decisions to assess whether equality of opportunity is being achieved. The information on the form will be treated as confidential, and used for statistical purposes only. The form will not be treated as part of your application.

**IF YOU HAVE A DISABILITY**

If you have a disability which prevents you from meeting any of the criteria, tell us about this in your application. Please tell us what we could do to help you meet the criteria.

If you need help in filling in the application form or need information in a different forma (for example large print), please let us know. If you have a disability we will offer you an interview as long as you meet the essential requirements of the job.

The Disability Discrimination Act defines ‘disability’ as follows:

‘A physical or mental impairment which has a substantial and long-term effect on the person’s ability to carry out normal day to day activities’.

**DATA PROTECTION**

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**RECRUITMENT QUESTIONNAIRE FORM**

It would be very much appreciated if you complete and return this questionnaire whether or not you intend completing the application form.

The information contained within the questionnaire will be used for analysis and will not form any part of the selection process. Thank you for your co-operation in completing this form.

**RECRUITMENT QUESTIONNAIRE**

As part of our work towards ensuring the most effective use of resources, we hope to learn from those who participate in the recruitment process. To do this, we would be grateful if you would complete this survey form as your views are important to us. This will provide constructive feedback to facilitate continuous improvement in our service, which will enable us to provide a service which reflects our customers’ needs.

**It would be very much appreciated if you complete and return this questionnaire whether or not you intend completing the application form.**

The information contained within the questionnaire will be used for analysis and will not form any part of the selection process. Thank you for your co-operation in completing this form.

Post: Closing Date

**GENERAL INFORMATION**

| **1. How did you find out about the post?**  | **(Tick relevant box)** | **P** |
| --- | --- | --- |
| a. Town Council’s Website |  |  |
| b. Town Council’s Facebook Page |  |  |
| c. Indeed website |  |  |
| d. North East Jobs website |  |  |
| e. Job Centre |  |  |
| f. Word of Mouth |  |  |
| g. Publication (please specify) |  |  |
| h. Other (please specify |  |  |

| **2. Please specify what attracted you to apply?**  | **(tick relevant boxes)** | **P** |
| --- | --- | --- |
| a. Salary |  |  |
| b. Nature of the job |  |  |
| c. Other benefits |  |  |
| d. Career Opportunities |  |  |
| e. Advert |  |  |
| f. Other (please specify) |  |  |

**3. If you have decided not to apply please state what contributed to your decision.**

**4. Please indicate your views in relation to the information provided by ticking the boxes below**

|  |  | 1Unsatisfactory | 2Satisfactory | 3Good | 4Excellent |
| --- | --- | --- | --- | --- | --- |
| 1. | Guidance to Candidates |  |  |  |  |
| 2. | Layout of application form |  |  |  |  |
| 3. | Employment information |  |  |  |  |
| 4. | Standard and relevance of other information |  |  |  |  |
| 5. | Ease of reading and clarity of material |  |  |  |  |
| 6. | Overall level of satisfaction with information |  |  |  |  |

| **5. Which aspects of the pack did you feel were most useful?** |
| --- |
|  |

| **6. Were there any aspects of the pack that did not meet your requirements?** |
| --- |
|  |

| **7. Please provide any general comments you may have upon the recruitment service that has been provided.** |
| --- |
|  |

| **8. How do you think the pack could be improved?** |
| --- |
|  |

Signed ……………………………………………….. Date ………………………………..

Print name …………………………………………...

**Thank you for taking the time to complete this survey**

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