

PRIVATE & CONFIDENTIAL

Rushmoor Borough Council welcomes applications from all sections of the community regardless of age, sex, marital status, race, colour, ethnic origin, nationality or disability

Criminal records will be taken into account for recruitment purposes only when the conviction is relevant

Application for post of:.....		Hourly Rate:
Start Date:	End Date:	
To be returned to: Personnel Services COUNCIL OFFICES FARNBOROUGH ROAD FARNBOROUGH HAMPSHIRE GU14 7JU Tel: (01252) 398426 Fax: (01252) 398078		
PERSONAL DETAILS		
Surname:	Mr/Mrs/Miss/Ms	Address:
Forenames:
Telephone:	Home
.....	Work	Postcode:
Date of Birth:		N.I. No.
EMERGENCY CONTACT DETAILS:		
Name:		Tel No:
Relationship: (Please circle one) Father/Mother/Husband/Wife/Son Daughter/Partner/or Other		
Bank Account Details:		
	Bank Name:	
	Sort Code: _ _ - _ _ - _ _	
	Account No. _ _ _ _ _ _ _ _	
P45 or P46:	Attached/To Follow (please provide by 3 rd of the month or code BR will operate)	

MISCELLANEOUS

Do you possess a full and clean driving licence? (only relevant if required by the post) YES/NO/N/A

Do you have access to transport which can be used for work purposes? YES/NO/N/A

Are you related to any Councillor or employee of the Council? YES/NO

If so, please give details.....

Have you previously been employed by Rushmoor Borough Council YES/NO

If so, when Position Held

Have you attended an interview at Rushmoor Borough Council within the last 6 months? YES/NO

Will you require a work permit for this employment? YES/NO

REFERENCES

PLEASE SUPPLY THE NAME AND ADDRESS OF AT LEAST 2 REFEREES. YOUR REFERENCES SHOULD BE FROM SENIOR MANAGERS/SUPERVISORS AND COVER THE LAST 3 YEARS OF EMPLOYMENT, INCLUDING YOUR MOST RECENT EMPLOYER. YOU MUST NOT USE FRIENDS OR RELATIVES AS REFEREES. IF YOU ARE A STUDENT, PLEASE GIVE THE NAMES OF 2 LECTURERS/SUPERVISORS/TEACHERS.

NAME	NAME
POSITION	POSITION
ADDRESS	ADDRESS
POSTCODE	POSTCODE
TEL NO.	TEL NO.

May we approach if called for interview YES/NO May we approach if called for interview YES/NO

NAME	NAME
POSITION	POSITION
ADDRESS	ADDRESS
POSTCODE	POSTCODE
TEL NO.	TEL NO.

May we approach if called for interview YES/NO May we approach if called for interview YES/NO

I declare that the information provided on this form is correct. I agree to this information being held electronically and manually if I am appointed to the post.

Signature Date

RUSHMOOR BOROUGH COUNCIL

HEALTH ASSESSMENT QUESTIONNAIRE

POSITION OF.....

SERVICE.....

PLEASE READ THIS CAREFULLY BEFORE COMPLETING THIS FORM

Please complete this form and return it by post or email to Personnel Services. Your information will be treated as confidential. Please be aware that at the end of this form you will be asked to declare that all the statements you make are true to the best of your knowledge.

Mr/Mrs/Ms.....

Surname.....

First Names.....

PLEASE TICK AS APPROPRIATE

Yes No

Do you have a health condition that you feel may impact on your ability to undertake the proposed role?

Do you consider yourself to be disabled?

STATEMENT

1. I declare that all the foregoing statements are true to the best of my knowledge.
2. I understand that I may, in confidence, be requested to complete a full medical questionnaire which will be reviewed by the Occupational Health Adviser.
3. I understand that the Council may refer me to the Occupational Health Adviser for possible consultation.
4. I consent for this information being stored and linked to other Personnel data held by the Council.

Signed:.....

Date:.....

RUSHMOOR BOROUGH COUNCIL

ADDITIONAL INFORMATION FOR SHORTLISTED CANDIDATES

As you have been short-listed for interview, we require the following details from you. Please complete the attached information and bring it with you to interview.

REHABILITATION OF OFFENDERS ACT 1974

a)	Have you ever been convicted of a criminal offence?	YES/NO
If yes, nature of offence		
Date of conviction		Sentence imposed
b)	Have you any charges pending at present?	YES/NO
If yes, nature of offence		
<p>NOTE Spent convictions should not be included, unless you are applying for a position where a conviction can never become "spent".</p>		

I confirm the above information is correct. I understand that, if appointed, incorrect or misleading information may result in termination of employment. I also understand that any offer of appointment will be made subject to satisfactory medical screening. I agree to this information being held electronically and manually if I am appointed to the post.

Signed: Dated:



Instructions for employers

This Starter Checklist can be used to gather information about your new employee. You can use this information to help fill in your first Full Payment Submission (FPS) for this employee. You need to keep the information recorded on the Starter Checklist record for the current and previous three tax years. Do not send this form to HM Revenue and Customs (HMRC).

Instructions for employees

As a new employee your employer needs the information on this form before your first payday to tell HMRC about you and help them use the correct tax code. Fill in this form then give it to your employer. Do not send this form to HMRC.

Employee's personal details

1 Last name

2 First name(s)
Do not enter initials or shortened names such as Jim for James or Liz for Elizabeth

3 Are you male or female?
Male Female

4 Date of birth DD MM YYYY

5 Home address

Postcode

Country

6 National Insurance number (if known)

7 Employment start date DD MM YYYY

Employee statement

8 You need to select only one of the following statements A, B or C

- A** This is my first job since last 6 April and I have not been receiving taxable Jobseeker's Allowance, Employment and Support Allowance, taxable Incapacity Benefit, State or Occupational Pension.
- B** This is now my only job but since last 6 April I have had another job, or received taxable Jobseeker's Allowance, Employment and Support Allowance or taxable Incapacity Benefit. I do not receive a State or Occupational Pension.
- C** As well as my new job, I have another job or receive a State or Occupational Pension.

Please turn over >

Student Loan

9 Do you have a Student Loan which is not fully repaid?

Yes If yes, go to question 10

No If no, go to question 12

10 Are you repaying your Student Loan direct to the Student Loans Company by agreed monthly payments?

Yes If yes, go to question 12

No If no, go to question 11

Student Loan Plans

You will have a Plan 1 Student Loan if:

- You lived in Scotland or Northern Ireland when you started your course, or
- You lived in England or Wales and started your course before September 2012

You will have a Plan 2 Student Loan if you lived in England or Wales and started your course on or after 1 September 2012.

11 What type of Student Loan do you have?

Plan 1

Plan 2

12 Did you finish your studies before the last 6 April?

Yes

No

For further guidance about repaying Student Loans go to www.gov.uk/new-employee/student-loans

Signature

Name

Date DD MM YYYY