Application form Wells City Council

Position applied for			Market Supervisor		
How did you hear about this position?					
Personal Details					
Title					
Surname					
Forenames					
Address					
Postcode	1				
DI NI I	Home				
Phone Numbers	Work				
	Work Mobile				
Email address	MODIIC		NI Number		
Billail address			THE THIRDE		
Please state any special requi	rements				
needed, either at your intervi					
your place of work					
Eligibility to work in the UK		ion by n			
Do you need a work permit?			YES / NO		
If yes, do you have a work p What type is it?	emme.				
Please state number					
Tionse state frameer					
Education					
Establishment	Fron	n To	o Qualifications Gained		
			chievement may be required)		
Establishment	Fron	n To	Status or Qualifications Gained		

Other Relevant Training Courses attended	
Employment History	
	tory starting with your current or last employer, working
backwards to your first employer. If necessary, plea	se insert additional boxes.
Name of employer	
Dates of employment	
Position and main duties	
Name of employer	
Dates of employment	
Position and main duties	
I and the second	

Name of employer	
Dates of employment	
Position and main duties	
Name of employer	
Dates of employment Position and main duties	
Position and main duties	
0 1 111	
Gaps in work history Please give details of any time not already	
Please give details of any time not already	7 3
accounted for (including voluntary work and unemployment)	
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	

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