Seasonal Grounds Maintenence Operative Application Form

**Post Title:** Seasonal Grounds Maintenance Operative

**Responsible to:** Grounds Maintenance Team Leader

**Responsible for:** To carry out a wide variety of grounds maintenance tasks and operations on a day to day basis across all sites owned, managed or maintained by Gainsborough Town Council.

**Hours / position:** 37 hours per week / temporary April - September

**Grade / Salary:** Below LC SCP 2 / £18,198

**Pension:** Post holder eligible to join Local Government

Pension Scheme

**The deadline for applications is 12.00pm on Thursday 8 April 2021.**

**Interviews are likely to be held on Thursday 15 or Friday 16 April 2021.**

**Write clearly and in black typeface or black ink.**

**Informal discussions concerning the role can be made by contacting the Operations Manager, Sean Alcock email sean.alcock@gainsborough-tc.gov.uk**

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| PERSONAL DETAILS | |
| **Name** |  |
| **National Insurance Number** |  |
| **Home Address** |  |
| **Home Telephone** |  |
| **Mobile** |  |
| **Email** |  |
| **Please identify or circle:** I prefer to be contacted by **home phone / mobile / email** | |

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| PRESENT EMPLOYMENT | | | | |
| **Present Job Title** |  | | | |
| **Salary Grade** |  | | | |
| **Name of Employer** |  | | | |
| **Address of Employer** |  | | | |
| **Date of Appointment** |  | | | |
| **Reason for Leaving** |  | | | |
| **Period of Notice Required** |  | | | |
| **Please give a brief description of your duties and responsibilities:** | | | | |
| EMPLOYMENT HISTORY – COMPLETE IN CHRONOLOGICAL ORDER WITH THE MOST RECENT POSITION FIRST | | | | |
| PAST EMPLOYMENT – POSITION 1 | | | | |
| **Past Job Title** |  | | | |
| **Salary Grade** |  | | | |
| **Name of Employer** |  | | | |
| **Address of Employer** |  | | | |
| **Date of Appointment** |  | | | |
| **Date/Reason for Leaving** |  | | | |
| **Please give a brief description of the duties and responsibilities:** | | | | |
| PAST EMPLOYMENT – POSITION 2 | | | | |
| **Past Job Title** |  | | | |
| **Salary Grade** |  | | | |
| **Name of Employer** |  | | | |
| **Address of Employer** |  | | | |
| **Date of Appointment** |  | | | |
| **Date/Reason for Leaving** |  | | | |
| **Please give a brief description of the duties and responsibilities:** | | | | |
| PAST EMPLOYMENT – POSITION 3 | | | | |
| **Past Job Title** |  | | | |
| **Salary Grade** |  | | | |
| **Name of Employer** |  | | | |
| **Address of Employer** |  | | | |
| **Date of Appointment** |  | | | |
| **Date/Reason for Leaving** |  | | | |
| **Please give a brief description of the duties and responsibilities:** | | | | |
| PAST EMPLOYMENT – PLEASE CONTINUE ON ANOTHER SHEET IF REQUIRED OR ADD MORE BOXES | | | | |
| EDUCATION AND TRAINING – PLEASE CONTINUE ON ANOTHER SHEET IF REQUIRED OR ADD MORE BOXES | | | | | |
| EDUCATION | | | | | |
| **Name of institution (School, College, University, etc)** | | **Subject(s)** | **Level(s)** | **Grade(s)** | |
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| RELEVANT TRAINING | | | | | |
| **Name of institution (School, College, University, etc)** | | **Training** | **Level(s)** | **Grade(s)** | |
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| RELEVANT MEMBERSHIP OF PROFESSIONAL BODIES | | | | | |
| **Name of Body or Institution** | | **Grade of Membership** | | **Date Awarded** | |
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| APPLICANTS WITH A DISABILITY |
| **The Town Council is committed to treating job applicants with a disability equally and fairly, making reasonable adjustments where necessary. Please tick if you are a disabled person and are applying on that basis:**  **YES □ NO □** |

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| REFERENCES | | |
| FIRST REFEREE – PRESENT EMPLOYER OR LAST EMPLOYER | | |
| **Name** |  | |
| **Address** |  | |
| **Email** |  | |
| **Contact Telephone** |  | |
| **Relationship to applicant** |  | |
| SECOND REFEREE | | |
| **Name** |  | |
| **Address** |  | |
| **Email** |  | |
| **Contact Telephone** |  | |
| **Relationship to applicant** |  | |
| **May your references be taken up prior to interview? YES □ NO □** | | |
| SUPPORTING INFORMATION – PLEASE CONTINUE ON ANOTHER SHEET IF REQUIRED OR ADD MORE BOXES | | |
| **Please give your reasons for applying for this post and the experience, as well as the skills and knowledge you have that is relevant to the post.**  **Please refer to the Person Specification and Job Description.** | | |
| QUALIFICATIONS | | |
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| WORK EXPERIENCE | | |
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| SKILLS AND KNOWLEDGE | | |
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| PERSONAL QUALITIES | | |
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| ADDITIONAL INFORMATION | |
| **Are you related to any Member or Senior Officer of the Town Council?**  **YES □ NO □** | |
| **Where did you first see the vacancy advertised?** | |
| **Do you hold a current driving licence? YES □ NO □** | |
| **Eligibility for employment**  Are you currently eligible for employment in the UK? **YES □ NO □**  Relevant documentation will need to be provided in order to demonstrate this *(British Passport, Birth Certificate, P45 etc – showing authorisation to work and reside in the UK).* | |
| **Criminal Record**  Having a criminal record will not necessarily bar an applicant from employment with the Council. This will depend upon the nature of the position applied for and the circumstances and background to the offence(s).  **Do you have any convictions, cautions, reprimands or final warnings that are not ‘protected’ as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013)?**  **YES □ NO □**  **If YES, please provide details regarding the nature of the offence and the date of the conviction/caution, reprimand or warning:** | |

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| YOUR SIGNATURE |
| **It is understood that canvassing of any Member of the Town Council, directly or indirectly, in connection with this appointment shall disqualify the candidate.**  **I declare that the information given on this application is to the best of my knowledge true and complete and I understand that verification checks may be made. I also understand that if the information I have given is found to be untrue or misleading this will be sufficient grounds for disqualification from appointment or dismissal from any employment gained.**  **Signature: Date:** |

**RETURN OF THE COMPLETED APPLICATION FORM**

Please return the completed application form before the closing date.

You can email it to: **Rachel.allbones@gainsborough-tc.gov.uk**

Alternatively, you can post it to: **Gainsborough Town Council, Richmond House, Richmond Park, Morton Terrace, Gainsborough, Lincolnshire, DN21 2RJ.**

Mark all correspondence as: **‘STRICTLY CONFIDENTIAL – JOB APPLICATION’**