BRACKLEY TOWN COUNCIL

Employment Application

Please complete ALL sections of the form

Job title applied for:	**Post Reference:** BTCEP1026
Closing date: Wednesday 25 November 2026	

1. Personal details	
Name:	Preferred Title:
Address: Post Code:	
Telephone Numbers: - Daytime - Evening - Mobile	
Email address:	

2. Present or Most Recent Employer / Employment	
Name: Address: Post Code:	Period From: Period To: Name of Supervisor: Telephone Number: Basic salary: Notice period:
Nature of business:	
Position held & nature of responsibilities:	

Reason for leaving:

3. Previous employment (in date order, starting with most recent)

Please state all employment and account for any gaps.

Failure to do so may result in your application not being considered – particularly if you are applying for a job which is exempt from the Rehabilitation of Offenders Act 1974.

Job Title; Name of Employer and Type of Business:	From (state month & year)	To (state month & year)	Brief summary of duties and reason for leaving (if applicable):

01280 702 441
office@brackleynorthants-tc.gov.uk
www.brackleynorthants-tc.gov.uk

4. Essential and desirable criteria – see the appropriate person specification
*The job specification gives details of the **essential** and **desirable** attributes of our ideal candidate. Please use this opportunity to state clearly how you meet **each** of the criteria set out in the employee specification.*

5. Your reasons for applying for this post:

Please use this space to tell us about your reasons for applying for this post.

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6. Reference details	
Please give the names and addresses of two people who would be willing to provide a reference concerning your application. ***One*** *of the referees* ***must be*** *your current/last employer.*	
Name: Address: Post Code: Daytime contact number:	Name: Address: Post Code: Daytime contact number:
Email:	Email
Is this person your present or previous employer? ☐ Yes ☐ No	Is this person your present or previous employer? ☐ Yes ☐ No
If you answered 'no' to the above question, in what capacity does the referee know you?	If you answered 'no' to the above question, in what capacity does the referee know you?
References will normally be taken up prior to interview. Please indicate if your referee can be contacted at this stage. ☐ Yes ☐ No	***References will normally be taken up prior to interview. Please indicate if your referee can be contacted at this stage.*** ☐ Yes ☐ No

7. Relationship to existing council employees or councillors
If you have any personal relationship to any Brackley Town Councillor, member of a committee of the Council or employee of the Council, please give their name and relationship. Any approach to Councillors or other employees to influence a selection decision will disqualify you. This does not stop a Councillor or employee giving a reference.

8. Education		
Please tell us about your education, beginning with the most recent.		
Date From	Date To	Name of School, College or University

9. Educational and professional qualifications

You must complete this section if some kind of educational attainment is stated as an essential or desirable attribute on the employee specification. You may include relevant training courses and membership of professional bodies.

Type of Qualification & Level e.g. GCSE 'O' level	Full Title of Subject Taken & Title of Examining Board	Grade or Mark



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10. Driving or car ownership status

Are you a vehicle owner? ☐ Yes ☐ No

Do you hold a full clean current licence? ☐ Yes ☐ No

If No, please give details of any penalties or endorsements.

Please state any other type of licence you hold (e.g. HGV)

11. Rehabilitation of Offenders

Have you been convicted of a criminal offence which is <u>not spent</u> under the Rehabilitation of Offenders Act 1974?

☐ Yes ☐ No

If YES please provide details

12. Right to Work in the UK (Asylum & Immigration Act 1996)
You will be required to produce original documents to prove your eligibility at the interview/assessment stage and bring photocopies of them. Please don't forget to bring them with you, otherwise we will not be able to progress your application any further.

13. Special Requirements
Do you have any special requirements if you were invited to interview/assessment? If YES please provide further details

12. Declaration
The details given by me are correct to my knowledge and belief. I understand that canvassing will automatically disqualify my application. I also understand that my application may be rejected or my employment may be terminated for withholding relevant details or giving false information. This declaration also covers information provided in a CV or other document. Signature: Date: **If returning this form electronically, please type your full name in the space above. This will be treated as a signature.*

Application Details

Once completed, please return your application form to Kathy Hale, Town Clerk, at Brackley Town Council. You can submit your application as an email attachment, by post, or in person at the Brackley Town Council office.

Application Deadline: 5pm Wednesday 25 November 2026

Email (Digital Applications)
office@brackleynorthants-tc.gov.uk

Post or In Person
Kathy Hale, Town Clerk
Brackley Town Council
20 High Street
Brackley
Northamptonshire
NN13 7DS

BRACKLEY TOWN COUNCIL

For office use only		
EO Interview	☐ Yes	☐ No
Shortlist	☐ Yes	☐ No
Reference one	☐ Requested	☐ Returned
Reference two	☐ Requested	☐ Returned
Medical check	☐ Requested	☐ Returned

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BRACKLEY TOWN COUNCIL

Equality and Diversity Monitoring Form

BRACKLEY TOWN COUNCIL wants to meet the aims and commitments set out in its equality policy. This includes not discriminating under the Equality Act 2010, and building an accurate picture of the make-up of the workforce in encouraging equality and diversity.

The Council needs your help and co-operation to enable it to do this, but filling in this form is voluntary.

The information you provide will stay confidential, and be stored securely and limited to only those staff with Human Resources responsibilities.

Please return the completed form with your application to:
Kathy Hale, Brackley Town Council, 20 High Street, Brackley, Northants NN13 7DS

Gender Male ☐ Female ☐ Prefer not to say ☐

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 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 ☐

Note: *This form will be detached from your application and will not be used in determining your suitability for the post.*