

Godmanchester Town Council

Town Clerk
Vicky Pryce
e: townclerk@gmccouncil.com



Town Hall
1 Post Street
Godmanchester
PE29 2NB
t: 01480 388870
www.gmccouncil.com

APPLICATION FORM

POSITION APPLIED FOR:

NAME: **M/F**

ADDRESS: POST CODE:	TEL NO: MOBILE NO: E-MAIL ADDRESS:
DATE OF BIRTH	NATIONALITY
DO YOU REQUIRE A WORK PERMIT TO WORK IN THE UK?	YES/NO
IF YES DO YOU HAVE ONE?	YES/NO

PLEASE GIVE NAMES AND ADDRESSES OF TWO REFEREES
(please state how you know the referee and how long you have known them)

Referee 1	Referee 2

PLEASE STATE THE CAPACITY IN WHICH THE REFEREE IS KNOWN TO YOU

Referee 1	Referee 2
YOU ARE REQUIRED TO DISCLOSE ALL/ANY PREVIOUS CONVICTIONS: PLEASE PROVIDE DETAILS	

PLEASE PROVIDE DEETAILS OF PREVIOUS OR EXISTING MEDICAL CONDITION(S) WHICH MAY EFFECTYOU CARRYING OUT THE DUTIES OF THE POSITION

PLEASE PROVIDE DETAILS OF YOUR PREVIOUS EMPLOYMENT AND WORK EXPERIENCE ON A SEPARATE SHEET WHERE DID YOU HEAR ABOUT THIS POSITION?

Signature..... Date.....