HM GOVERNMENT OF GIBRALTAR

PHOTO



APPLICATION FORM

HUMAN RESOURCES DEPARTMENT 82-86 HARBOUR'S WALK NEW HARBOURS ROSIA ROAD GIBRALTAR

1. POST APPLIED	FOR:
Post Title:	
Name of applicant:	

- Please ensure that you answer all the questions as fully as possible.
- Type or write neatly in black ink, as this form will be photocopied.
- Original documents as proof of academic and other qualifications must be produced. (These will be photocopied and returned immediately).
- A recent passport sized photograph must be affixed in the space provided above.
- Two references are required to be submitted to the Human Resources Manager at the above address, not later than five working days after the closing date.
- Once completed, this application form must be <u>handed in</u> to The Human Resources Manager, <u>Human Resources Department</u>, 82-86 <u>Harbour's</u> <u>Walk, New Harbours, Rosia Road, Gibraltar</u>, by the closing date for receipt of applications.

<u>NOTE</u>: Should you have any queries relating to your application either prior to or after interview, you may write to the Human Resources Manager, at the above address.

Do not write below this line.

FOR OFFICIAL USE ONLY

U U	
SEEN	RETURNED
NO.	
	SEEN

2. PERS	SONA	L INFOR	RMATION				
Title:			Surname				
Forenar	nes:						
Previous	s Nan	ne if Appl	icable:				
Date of	Birth:						
Nationali	ity:						
Address	S :						
Postcod (if applic)					
Driving Lie (if applica please sta category)	ble,						
Please ir	ndicat	e which o	of the following	we may	use to cont	tact vou:	(Please tick)
		one Num					(,
Work Te	elepho	one Numb	per:				
Mobile T	Telepl	none Nun	nber:				
email ac	dres	s:					

3. EMPLOYMENT HISTORY

Please list in order (the most recent first), the organisation(s) you have worked for, whether full or part time, including voluntary, unpaid, or self employed work. (*PLEASE USE ADDITIONAL SHEETS IF NECESSARY*)

(a) Current (or most recent) Employer's Name and Address:				
Dates of Employment:	From:		То:	
Job Title:				
Reason for leaving:				
Brief outline of Duties:				
(b) Previous Employer'	s Name a	nd Address:		
Dates of Employment:	From:		То:	
Job Title:	FIOIII.		10.	
Reason for leaving:				
Brief outline of Duties:				
(c) Previous Employer's	s Name a	nd Address:		
Dates of Employment:	From:		To:	
Job Title:				
Reason for leaving:				
Brief outline of Duties:				

4. QUALIFICATIONS Please give details of		s) held and where obta	ined.
School(s)	Date(s)	Subject(s)	Grade(s)
5. FURTHER & HIGH	IER EDUCATION		
Please give details of	any furthar or high	or advection college	c/universities attended
and any qualifications		ier education - college.	s/universities attended
College / University/ Training provider	Date(s)	Subject(s)	Qualification(s)/Grade(s)

6.	IRAINING	AND DEVE	LOPMENI		

Please give details of further training taken – i.e. Management courses, IT courses, First Aid certificates etc.

College / University/ Training provider	Date(s)	Subject(s)	Qualification(s) / Grade(s)

7. PERSONAL STATEMENT		
Add any further information about yourself that you consider relevant to this application. You should describe your knowledge, experience, skills and abilities gained from your baid and/or voluntary work, studies, hobbies etc.		
(PLEASE USE ADDITIONAL SHEETS IF NECESSARY)		

submit a reference letter to the	nformation on your referees, whom you should ask to e Human Resources Manager, to reach him not later se closing date for receipt of applications.
(a) FIRST REFERENCE	
Full Name of Referee	
Full Address of Referee	
email address	
(b) SECOND REFERENCE	
Full Name of Referee	
Full Address of Referee	
email address	

8. REFERENCES

9. DATA PROTECTION ACT 2004

Under the Data Protection Act 2004, the Human Resources Department on behalf of the Government of Gibraltar, and the Public Service Commission, reserves the right to collect, store and process personal data about applicants in so far as it is relevant to their application for employment. This Application Form will remain on file for as long as administratively necessary and then be destroyed. All personal information held will be processed in accordance with the Data Protection Act 2004.

We will only disclose personal information contained in this form in the following circumstances:-

- If we are required to do so by any court order, or by law.
- If selected for the post, (except for information contained in Section 13), to other Government Departments (for administrative purposes) and to the Gibraltar Health Authority (for the purpose of Section 11).

10. (a) EQUALITY OF OPPORTUNITY

The Gibraltar Public Service on behalf of the Government of Gibraltar, is committed to a policy which ensures that all job applicants and employees receive equality of opportunity, therefore ensuring that all recruitment is solely on merit.

No applicant or employee will receive less favourable treatment on the grounds of age. disability, race, religious belief, sex or sexual orientation, or will be disadvantaged by conditions or requirements which cannot be shown to be justifiable.

10. (b) DISABLED APPLICANTS

In order to help us implement our equal opportunities policy effectively, please indicate

result of disability.
Please specify type of assistance required, e.g. wheelchair access.

11. MEDICAL

I understand that if I am selected for employment to the post for which I am applying, I will be required to undergo a medical examination and be declared fit for employment.

12. STATEMENT TO BE SIGNED BY APPLICANT

I hereby give consent to the collection, storage and processing of my personal details in connection with my application and as outlined in this application form.

I confirm that to the best of my knowledge, the information given in this application form is true and correct. I understand that giving false or misleading statements or withholding information, may result in withdrawal of an offer of employment, or my appointment being terminated if I have already been appointed.

NAME IN BLOCK LETTERS	SIGNED	DATE

CHECKLIST – Please ensure that you have provided the following:- (Please tick)			
I.D. or Passport	(i lease tick)		
Qualifications			
2 Reference Letters			

POST APPLIED FOR:				
13. DECLARATION OF CRIMINAL OFFENCES				
13. DECLAR	ATION OF CRIMINAL OFFE	INCES		
	en court martialled, or been co in Gibraltar or elsewhere? (Pl		ence within the last 10	
YES		NO		
If you have tid	cked yes then you must comp	lete the table below. P	lease use additional	
Date	Offence	Sentence	Pending Charges (Give dates)	
Failure to d	and only considered in relation relation relation relation relation relation relation and offer of appointment appointed.	equested in this Sec	tion, may lead to the	
Signed				
J				
(in block lette	rs)			
Date				