#### HM GOVERNMENT OF GIBRALTAR

PHOTO



#### **APPLICATION FORM**

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

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

- Please ensure that you answer all the questions as fully as possible. 'See CV' will not be accepted.
- 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

DOCUMENT	SEEN	RETURNED
Evidence of Nationality		
Qualifications		
I/D CARD OR PASSPORT I	VO.	

2. PERSONAL II	NFORMATION				
Title:	Surname				
Forenames:					
Previous Name	if Applicable:				
Date of Birth:					
Nationality:					]
Address:					]
Postcode: (if applicable)					1
Driving Licence: (if applicable, please state category)					
Please indicate w	which of the following	n we may us	se to conta	ct vou:	(Please tick)
Home Telephon		,,			(
Work Telephone	e Number:				
Mobile Telephor	ne Number:				
email address:					

		HIST	

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 red	ent) Employer's Name and	Address:
Dates of Employment:	From:	То:
Job Title:		
Reason for leaving:		
Brief outline of Duties:		
(b) Previous Employer'	s Name and Address:	
Dates of Employment:	From:	To:
Job Title:		
Reason for leaving:		
Brief outline of Duties:		
Diei odiline oi Daties.		
(c) Previous Employer's	Nome and Address	
(c) Previous Employers	s Name and Address.	
	1,	
Dates of Employment:	From:	То:
Job Title:		
Reason for leaving:		

Brief outline of Duties:			
4. QUALIFICATIONS			
Please give details of a	any qualification(s) he	eld and where obtained	
School(s)	Date(s)	Subject(s)	Grade(s)

# 5. FURTHER & HIGHER EDUCATION

Please give details of any further or higher education - colleges/universities attended and any qualifications obtained.

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

# 6. TRAINING AND DEVELOPMENT

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)

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

8. REFERENCES	
submit a reference letter to the	information on your referees, whom you should ask to ne Human Resources Manager, to reach him not later he closing date for receipt of applications.
Referees should not be relati	ves.
(a) FIRST REFERENCE	
Full Name of Referee	
Full Address of Referee	
email address	
(b) SECOND DEFEDENCE	
(b) SECOND REFERENCE Full Name of Referee	
Full Address of Referee	

email address

#### 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 below if you would like us to provide any particular assistance for your interview, as a result of disability.

result of disability.		
Please specify type of assistance required, e.g. wheelchair access.		
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## 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							
Qualifications							
2 Reference Letters							

POST APPLIED FOR:								
13. DECLARATION OF CRIMINAL OFFENCES								
Have you been court martialled, or been convicted of a criminal offence within the last 10 years, either in Gibraltar or elsewhere? (Please tick below)								
YES	1	NO						
If you have ticked yes then you must complete the table below. Please use additional sheet if necessary.								
Date	Offence	Sentence		Pending Charges (Give lates)				
				,				
Failure to disclose any information requested in this Section, may lead to the withdrawal of an offer of appointment, or termination of employment if you have already been appointed.								
Signed								
Name (in block lette	rs)							
Date	]							