

PHOTO

EXTERNAL APPLICATION FORM GIBRALTAR DEVELOPMENT CORPORATION **DEPARTMENT OF PERSONNEL & DEVELOPMENT** 82-86 HARBOUR'S WALK **NEW HARBOURS ROSIA ROAD GIBRALTAR**

1. POST APPLIED FOR:	
Post Title:	
Name of Applicant: (In CAPITALS)	

- 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.
- A recent passport sized photograph must be affixed in the space provided above.
- Once completed, this application form along with copies of qualifications and completed vetting form must be submitted to The GDC Secretary, via email at, by the closing date for receipt of applications. recruitment@gibraltar.gov.gi (Original qualifications will need to be brought in to the interview stage)
- Please do not send completed vetting forms to the RGP. Human Resources will do this and pay the £10 fee on your behalf.
- Two references are required to be submitted to the GDC Secretary via email at. recruitment@gibraltar.gov.gi , not later than five working days after the closing date.

NOTE: Should you have any queries relating to your application either prior to or after interview, you may write to the GDC Secretary via email, at recruitment@gibraltar.gov.gi. Do not write below this line.

FOR OFFICIAL USE ONLY **DOCUMENT** SEEN **RETURNED** Evidence of Nationality Qualifications I/D CARD OR PASSPORT NO.

2. PER	SONAL IN	ORMATION	
Title:		Surname:	
Forena	mes:		
Previou	us Name: able)		
Date o	f Birth:		
Nationa	ality:		
Addres	s:		
Postco (if applic			
	Licence: able, please tegory		

Please indicate which of the	following we may use to contact your:	(Please tick)
Home Telephone Number:		
Work Telephone Number:		
Mobile Telephone Number:		
Email Address:		

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 red	ent) Employer's Name ar	d Address:	
(a) Garrent (or most rec	enty Employer a Name ar	14 / 1441 CSS.	
Dates of Employment:	From:	To:	
Job Title:			
Reason for Leaving:			
Brief Outline of Duties:			
(b) Previous Employer's	s Name and Address:		
(b) Previous Employer's	s Name and Address:		
(b) Previous Employer's	s Name and Address:		
(b) Previous Employer's	s Name and Address:		
Dates of Employment:	S Name and Address: From:	To:	
		To:	
Dates of Employment: Job Title: Reason for Leaving:		To:	
Dates of Employment: Job Title:		To:	
Dates of Employment: Job Title: Reason for Leaving:		То:	
Dates of Employment: Job Title: Reason for Leaving:		To:	
Dates of Employment: Job Title: Reason for Leaving:		To:	
Dates of Employment: Job Title: Reason for Leaving:		To:	

	Nomo	and Addraga:		
(c) Previous Employer's	i Naille a	and Address.		
D (_	
Dates of Employment: Job Title:	From:		То:	
Reason for Leaving:				
Brief Outline of Duties:				
(d) Provious Employer's	Nomo	and Address:		
(d) Previous Employer's	s Name a	and Address.		
Dates of Employment:	From:		То:	
Dates of Employment: Job Title:	From:		То:	
	From:		То:	
Job Title:	From:		То:	
Job Title: Reason for Leaving:	From:		To:	
Job Title: Reason for Leaving:	From:		To:	
Job Title: Reason for Leaving:	From:		To:	
Job Title: Reason for Leaving:	From:		To:	

Please give details of	f any qualificat	ion(s) held and where	obtained.
School(s)	Date(s)	Subject(s)	Grade(s)
E EUDTHED A HIGH	IED EDUCATI	ION .	
5. FURTHER & HIGH			
Please give details of and any qualifications		higher education – co	lleges/universities attended,
College / University / Training Provider	Date(s)	Subject(s)	Qualification(s) Grade(s)
		_	
6. TRAINING AND D	EVELOPMEN	T	
Please give details of First Aid certificates,		ng taken – i.e. Manag	ement courses, IT courses,
College / University Training Provider	Date(s)	Subject(s)	Qualification(s) Grade(s)

4. QUALIFICATIONS

7. PERSONAL STATEMENT
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)

8. REFERENCES

(a) First Reference

Please provide the following information on your referees, whom you should ask to submit a reference letter to the GDC Secretary, not later than five working days after the closing date for receipt of applications

Referees should not be relatives.

Please note that references must:

- be dated within 3 months of the closing date
- not contain letterhead from the Department if written by a government official
- be appropriate to the post that you are applying for

Full Address of Referee: Email Address: (b) Second Reference Full Name of Referee: Full Address of Referee:	Full Name of Referee:	
(b) Second Reference Full Name of Referee:	Full Address of Referee:	
Full Name of Referee:	Email Address:	
Full Name of Referee:		
Full Name of Referee:	(h) Second Reference	
Full Address of Referee:		
	Full Address of Referee:	
Email Address:	Email Address:	

9. DATA PROTECTION ACT 2004

Under the Data Protection Act 2004, the Gibraltar Development Corporation, reserves the right to collect, store and process personal data about applicants in so far as it is relevant to their application. 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 Occupational Health Provider (for the purpose of Section 11).

10. (a) EQUALITY OF OPPORTUNITY

The Gibraltar Development Corporation, 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.

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.

By submitting this application form, I consent to my personal details, including Full Name, Date of Birth, Email address and Telephone Number, being shared with HMGOG's Occupational Health Provider, should my application be successful. This is to facilitate medical screening to determine my fitness for the role before I commence the position.

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:			
Two Reference Letters:			
Vetting form:			
Proof of Address:			

POST APPLIED FOR

13. DECLAR	RAT	ION OF CRIMINAL OFF	ENCES		
		court martialled, or been in Gibraltar or elsewhere			offence within the last
YES			NO		
If you have sheet if necessity		ed yes then you must co	mplete the table	below. I	Please use additional
Date	Off	fence	Sentence		Pending Charges (Give dates)
Having a criminal record will not necessarily bar you from taking up employment with the Gibraltar Development Corporation. This will depend on the nature of the position applied for and the circumstances and background of your offences. (Please use the space below to add any comments you may wish to make in this regard). Any information given will be treated confidentially and only considered in relation to the post for which you are applying.					
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 lett	ers)				
Date					