

TORPOINT TOWN COUNCIL

1-3, BULLER ROAD, TORPOINT, CORNWALL PL11 2LD

www.torpointtowncouncil.gov.uk admin@torpointtowncouncil.gov.uk

Application Form

Please complete in black ink or print

Surname: Address: Personal Details: Do you require a work permit to take up Do you hold a current clean driving licence Employment Record - Please list all	<i>Telep Email</i> employm		title:	
Personal Details: Do you require a work permit to take up Do you hold a current clean driving licence Employment Record - Please list all	Emai	il:		
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Employment Record - Please list all	(H)	ment in the U	K? Yes □ Yes □	
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starting with your present or last po you need to.				
Date From/To Position Held Dutie	?S		d address of ployer	Reason For Leaving
		1		

Education (since age 11)

Date From/To	Name of School, College or University	Qualifications Gained
Please aive vou	or reasons for applying for this posit.	ion, say what experience you feel you
have which wo	uld enable you to do it well. Please u	use a separate sheet if necessary.

eferences. Please give resent or last employe	the names and addresses of two referees. One should be r if possible.	you
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resent or last employed Referee 1 Rame Reddress Ray we approach them now Yes No	Referee 2 Name Address May we approach them now? Z Yes Z No	

Please give details of any outside interests or other information that you feel will support

your application.

Please return your completed application together with any other documentation requested to the **Town Clerk & RFO** at the address above by the deadline of **midday on Friday 26th July 2024.**

IN COLLABORATION WITH SLCC, NAUC, DVW: COUNTY ASSOCIATIONS