BASILDON BOROUGH COUNCIL

WORKING TIME REGULATIONS ADDITIONAL WORK FORM

NAME:

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| POST REF: | | | | | |
|---|-----|----------|-----|----------------|--|
| PLEASE COMPLETE THIS DOCUMENT AND RETURN IT ALONG WITH YOUR COMPLETED APPLICATION FORM | | | | | |
| Working arrangements with Basildon Borough Council comply with the relevant Health and Safety Legislation including the Working Time Regulations | | | | | |
| If you are successful in your application for the above post, will it be your sole employment? | | | YES | | |
| | | | NO | | |
| Please give details of all other paid employment you would be undertaking in addition to this post. (Including all other work with Basildon Borough Council.) | | | | | |
| NO. | JOB | EMPLOYER | | HOURS PER WEEK | |
| 4 | | | | | |