



*Individualised Support and Care*

## JOB APPLICATION FORM

All information given will be treated in the strictest confidence - **PLEASE PRINT CLEARLY.**

Application for the post of:
At

### 1. Personal details

Surname:	Address:
Title:	
Forenames:	
Maiden name: (if applicable)	
National Insurance No:	Postcode:
Tel No Home: Mobile:	Work: E-mail:

### 2. Present employment

Employer's name:	
Employer's address:	
Employer's telephone No:	

<b>Current Position:</b>	
Grade:	Salary:
Date appointed:	Length of notice period:

Brief summary of duties:
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**3. Full employment history (please use a separate sheet if required)**

Employer:	Post held:	From:	To:	Reason for leaving

**4. General education including VOCATIONAL QUALIFICATIONS**

Secondary school/Further education:	From:	To:	Qualification and grades:

Have you completed the Care Certificate? If so, please advise when this was awarded \_\_\_\_/\_\_\_\_/\_\_\_\_

**5. Professional qualifications**

Professional qualifications obtained:	Date:	Grade/Reg no:

**6. Further study**

Qualifications currently being studied for:	Level/Part:	Exam Date:

## 7. References

Do you have any convictions, cautions, reprimands or final warnings that are not “protected” as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013) by SI 2013 1198?

Yes No

Have you ever received a caution?

Yes No

Have you ever been convicted of a criminal or civil offence?

Yes No

This should include convictions that might in other circumstances be considered ‘spent’. Admitting to a previous offence does not mean that the applicant won’t be considered for employment. **If appointed to the post, a criminal record check (via the Disclosure & Barring Service) will be carried out.** This will be discussed at your interview. Any information related to the disclosure of previous offences will be kept strictly confidential.

**PLEASE GIVE DETAILS OF THREE REFEREES, WHO KNOW YOU WELL. ONE OF YOUR REFEREES SHOULD BE A SENIOR CONTACT FROM YOUR PRESENT OR MOST RECENT EMPLOYER, AND YOU SHOULD GIVE A FULL WORKPLACE ADDRESS AND WORK TELEPHONE NUMBER. PLEASE DO NOT INCLUDE RELATIVES OR FRIENDS.**

**NB Referees may be approached if short-listed, unless you request otherwise. Please note that no offer of employment can be made prior to the receipt of satisfactory references.**

Referee 1			
Title	Mr / Mrs / Miss / Ms	Position	
First Name		Surname	
Address			
Post Code		Telephone no	
Email		Mobile no	
Referee 2			
Title	Mr / Mrs / Miss / Ms	Position	
First Name		Surname	
Address			
Post Code		Telephone no	
Email		Mobile no	
Referee 3			
Title	Mr / Mrs / Miss / Ms	Position	
First Name		Surname	
Address			
Post Code		Telephone no	
Email		Mobile no	

8. Do you have your own car and a clean driving licence (Care at Home applicants only) Yes No

9. Do you require a work permit? Yes No

## 10. Additional information in support of your application

What attracts you to this position?

How will your previous employment experience benefit you in this role?

Please summarise your personal strengths, attributes and achievements in relation to this position.

Please provide any additional information which appears relevant. Such information might include skills developed in paid employment/voluntary community work/leisure interests. Please use this space and continue on a separate sheet if necessary.

## 10. Declaration

I understand that the appointment, if offered, will be subject to the information given on this form being correct and that falsifying an application and/or canvassing will disqualify applicants, or if appointed, render him/her liable to disciplinary action including dismissal. I understand that by filling in and returning this application form, my personal details will be kept for at least six months.

Signature:	Date:
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Did you need help to complete this application form?	Yes	No
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**Please return this form to:**