

# Application Form

<p>Our company is committed to equal opportunities in employment and we positively welcome your application irrespective of your gender, race, disability, colour, ethnic or national origin, nationality, sexuality, gender identity, marital status, responsibility for dependants, religion, trade union activity and age.</p> <p>Please complete all sections on the form by yourself and in your own handwriting. If any section does not apply to you, enter not applicable (n/a). It is important that you refer to the <i>Guidance Notes</i> before completing this form.</p>											
<b>1. Vacancy Details This section must be completed</b>											
Position Applied for:						Branch / Site / Home:					
<b>2. Personal Details</b>											
First Name(s):				Surname:							
Former Name(s)				Previous Surnames(If any):							
Address:						Title: e.g. (Mr, Mrs, Ms):					
						Postcode:					
						Mobile Phone No:					
<b>Email:</b>											
Please indicate if you are happy to receive correspondence via your email address e.g. invite to interview letter						Yes <input type="checkbox"/>			No <input type="checkbox"/>		
Current driving licence (if this is a requirement of this job):						Yes <input type="checkbox"/>			No <input type="checkbox"/>		
If Yes, type of licence				Do you have any endorsements If Yes please specify				Yes <input type="checkbox"/>		No <input type="checkbox"/>	
Are you available immediately						Yes <input type="checkbox"/>			No <input type="checkbox"/>		
If No, when would you be available?											
<b>Emergency Contact Details / Next of Kin Details</b>											
First Name(s):				Surname:							
Address:				Relationship to you:							
						Postcode:					
Home Tel no:				Mobile Tel no:							

**3. General Information**

Are you related to any employee of the company?  
 Yes  No

If yes, please provide details:

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Relationship: \_\_\_\_\_

Branch / Site / Home: \_\_\_\_\_

**4. Arrangements for interview**

Do you require any special arrangements or adjustments to enable you to attend an interview and/or undertake a work based assessment?

Yes  No

If yes, please specify, (e.g. ground floor venue, sign language interpreter, audio tapes etc). \_\_\_\_\_

**5. Eligibility to work in the UK**

<p><b>a)</b> Are there any legal restrictions on your continued residence or employment in the UK that might affect your ability to take up employment?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p><b>b)</b> If Yes, please provide further details and the type of visa that you currently have</p>	

**6. Education & Training**

From	To	Secondary School/ University / Organising Body etc	Examinations taken or Course Title	Results & grades	Date gained

**7. Membership Please indicate membership of any organisation(s) relevant to this job.**

Name of Organisation	Type of Membership	Date of Membership

**8. Present or Most Recent Employment (if any)**

Job Title: \_\_\_\_\_ Company Name: \_\_\_\_\_

Date Started: \_\_\_\_\_ Date left (if applicable) or  
Notice required: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Reason(s) for leaving (if applicable): \_\_\_\_\_

If offered this position will you continue to work in any other capacity with another employer?

Yes  No

If yes, give details

**Employment History:** Please list in reverse date order, starting with your most recent positions. Please include voluntary or other relevant experience and explain any gaps in your employment.

DATE FROM		DATE TO		Company Name & Address of Employer Including Post Code	Job Title and Brief Description of Duties	Reason for Leaving
MONTH	YEAR	MONTH	YEAR			

Please continue on a separate sheet if necessary.

**9. References:** Please give details of two referees one of which must be your current or most recent line manager/supervisor, or other person designated within the organisation to provide references. You should not give friends or relatives as referees

Do you require prior consent before a reference can be taken up? Yes  No

Full Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Tel no: \_\_\_\_\_ Email: \_\_\_\_\_

Job title: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

If this referee knows you by another name please give that name: \_\_\_\_\_

Full Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Tel no: \_\_\_\_\_ Email: \_\_\_\_\_

Job title: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

If this referee knows you by another name please give that name: \_\_\_\_\_

**10. Criminal Records Check**

The position for which you are applying is exempt from the provision of Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975. This means that any cautions, reprimands or final warnings, as well as convictions if unspent must be disclosed, all applicants who are offered employment will be subject to a criminal record check from the Disclosure of Barring Service before the appointment is confirmed.

Information provided will be kept confidential, and in accordance with the provisions of The Data Protection Act whereby information obtained and processed fairly and lawfully; is only disclosed in appropriate circumstances and not held longer than necessary. Only relevant convictions and other information will be taken into account and does not necessarily prevent appointment.

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)? Yes  No

If yes, please give details on a separate sheet. Any information supplied will remain confidential; having a criminal record will not necessarily prevent you from working for us. This will depend on the nature of the position and circumstances and background of your offence.

**11 – Practical Experience (FOR THOSE APPLYING FOR CARE / NURSING WORK ONLY)**

*To assist us in finding suitable work for you, please tick all the care tasks in which you are experienced:*

Personal hygiene		Practical tasks		Toileting	
Bath /shower/strip wash	<input type="checkbox"/>	Bed making/changing a bed	<input type="checkbox"/>	Applying a conveyer	<input type="checkbox"/>
Bed bath	<input type="checkbox"/>	Collecting benefits	<input type="checkbox"/>	Attaching a night bag	<input type="checkbox"/>
Care of eyes	<input type="checkbox"/>	Cooking	<input type="checkbox"/>	Bed pans/commodes	<input type="checkbox"/>
Care of feet (exc. toenails)	<input type="checkbox"/>	Light housework	<input type="checkbox"/>	Changing a catheter bag	<input type="checkbox"/>
Care of fingernails	<input type="checkbox"/>	Recording of blood pressure	<input type="checkbox"/>	Continence care	<input type="checkbox"/>
Care of hair	<input type="checkbox"/>	Recording of temperature	<input type="checkbox"/>	Emptying a catheter bag	<input type="checkbox"/>
Dressing/undressing	<input type="checkbox"/>	Recording of respiration	<input type="checkbox"/>	Stoma care	<input type="checkbox"/>
Mouth care (inc. dentures)	<input type="checkbox"/>	Shopping	<input type="checkbox"/>		
Shaving	<input type="checkbox"/>	Washing personal laundry	<input type="checkbox"/>		
Use of bath aids	<input type="checkbox"/>				
Administrative abilities		Mobility		Previous experience in:	
Confidentiality	<input type="checkbox"/>	Moving & handling clients	<input type="checkbox"/>	Hospital	<input type="checkbox"/>
Observing/recording	<input type="checkbox"/>	Moving & handling course	<input type="checkbox"/>	Nursing/residential home	<input type="checkbox"/>
Changes in clients' condition	<input type="checkbox"/>	Use of hoists (man. /elec.)	<input type="checkbox"/>	Private house	<input type="checkbox"/>
Recording instructions from GP/District nurse	<input type="checkbox"/>	Use of walking aids	<input type="checkbox"/>		
Care Duties		Nutrition			
Assisting with medication	<input type="checkbox"/>	Feeding	<input type="checkbox"/>		
Pressure area care	<input type="checkbox"/>	Food handling	<input type="checkbox"/>		
Simple dressing procedures	<input type="checkbox"/>	Preparing meals	<input type="checkbox"/>		
Terminal care	<input type="checkbox"/>				
<b>Please explain briefly how you gained this experience:</b>					

How did you first hear about the company?

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If through a current staff member please state their name:

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## 12. Other information in Support of your Application

In order for us to decide whether to call you for interview, it is essential that you provide us with sufficient details of any experience and skills which demonstrate how you meet the requirements of this job, as set out in the person specification. You may also continue on a separate sheet(s) if you wish. You should ensure that any additional sheets are attached securely and include your Name and Position Applied For.

**It is important that you refer to the 'Guidance Notes' when completing this section.**

## 13. Data Protection Act 1998 - Consent and Certification of Details

The information detailed in this application form may be used by the company in the monitoring and progression of its employment policies and practices. This monitoring is for statistical purposes only and you will not be identifiable from this process.

Application forms of unsuccessful candidates will be destroyed after twelve months following an appointment to the job

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I declare that I have completed this application form myself and to the best of my knowledge and belief, all particulars I have given are complete and true. I understand that any false declaration or misleading statement or any significant omission may disqualify me from employment and render me liable to dismissal. I understand that any job offer is subject to satisfactory references and a probationary period and if deemed appropriate a satisfactory medical report. I understand that if this post involves working with vulnerable people and the post is subject to a Criminal Record Check (from the Disclosure & Barring Service for England and Wales). Should I be offered such a post, I understand that a Criminal Record Check will be sought before the appointment is confirmed.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

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**Application forms not fully completed may be refused**