**JOB APPLICATION FORM / MODULO PER LA DOMANDA DI LAVORO**

Form AP2H(A)

***Please complete this Application Form in black ink then return it to the Manager / Si prega di compilare con inchiostro nero e consegnare il seguente Modulo al Manager.***

# PRIVATE & CONFIDENTIAL / PRIVATO E CONFIDENZIALE

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| **POSITION APPLIED FOR / Posizione Richiesta:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Ref No: …………….** (Office use only / esclusivo uso d’ufficio) |
| Title / Titolo :  | Schools Qualifications gained |
| Surname / Cognome: |
| Forename(s) / Nome di Battesimo: |
| Address / Indirizzo postale :Postcode /CAP :E-mail address / indirizzo email: |
| Tel. Nos (please include code) / Numeri di telefono (si prega di includere il prefisso nationale) (Home / Fisso):(Work / Lavoro):(Mobile / Mobile): |
| Current driving licence / Patente di guida? Yes / Si /NoGroups / tipologia : Expiry Date / data di scadenza:Details of any endorsements / si prega di fornire dettagli su eventuali sanzioni: | College/university Qualifications gained  |
| National Insurance No. |
| Are there any restrictions on you taking up work in the UK / Ci sono delle restrizioni nei suoi sul tuo lavoro nel Regno Unito ? Yes/No(If yes please provide details) | Other trainings / altri corsi di formazione: |
|  |
|  | Nationality / Nazionalità: |

## OTHER EMPLOYMENT

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| Please note any other employment you would continue with if you were to be successful in obtaining this position. |

# LEISURE

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| Please note here your leisure interests, sports and hobbies, or other pastimes, etc. |

**EMPLOYMENT HISTORY (Please complete in full using a separate sheet if necessary, starting with your most recent employment and give reasons for any gaps in employment)**

|  |  |  |  |
| --- | --- | --- | --- |
| Name & Address of employer | Dates EmployedJob Title & Duties | Salary onleaving | Reason for leaving |
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# REFERENCES

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| Please provide details of two referees who can provide information relating to your competency in a caring role, one of whom must be your present or most recent employer (referees for qualified Nurses must be professionals). If you are a student, please give an academic referee. If you are applying for a post which requires unsupervised access to children/vulnerable adults, we reserve the right to approach any past employer for a reference. |
| 1. | Name: | 2. | Name: |
|  | Position: |  | Position: |
|  | Organisation: |  | Organisation: |
|  | Address:Postcode: |  | Address:Postcode: |
|  | Tel No. |  | Tel No. |
|  | E-mail: |  | E-mail:  |
|  | May we approach the above prior to interview? Yes/No |  | May we approach the above prior to interview? Yes/No |

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| **JOB FLEXIBILITY** |
| Prepared to Work: Full-time [ ] Part-time [ ] Shifts [ ]If ‘Part-time’, please indicate preferred hours: ……………………………………………………………………Please provide details of any outstanding holidays to be taken: ………………………………………………….. |
| **GENERAL COMMENTS**Please detail here your reasons for this application, your main achievements to date and the strengths you would bring to this post. Specifically, please detail how your knowledge, skills and experiences meet the requirements of this role (as summarised in the person specification). |

**CAUTIONS, REHABILITATION AND CRIMINAL RECORDS**

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| Because of the nature of the work for which you are applying, this post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974, by virtue of the Exceptions Order 1975 as amended by the Exceptions (Amendment) Order 1986, which means that convictions that are spent under the terms of the Rehabilitation of Offenders Act 1974 **must be disclosed**, and will be taken into account in deciding whether to make an appointment. Any information will be completely confidential and will be considered only in relation to this application.In addition you are required to submit to a Criminal Records Bureau check. Any standard or enhanced disclosure made by the CRB/SCRO will remain strictly confidential. Have you ever been convicted in a Court of Law and/or cautioned in respect of any offence? YES/NO (delete as required)If YES, please give details |

**SPECIAL REQUIREMENTS (CARE SECTOR)**

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| Because this position involves the care of children and/or vulnerable adults employment is dependent on the following:1. Your written consent to obtaining a standard/enhanced disclosure certificate from the Criminal Records Bureau or an approved umbrella body.
2. Such disclosure being acceptable to us.
3. Proof of identity – birth or marriage certificate (where appropriate) and passport (if available).
4. Two satisfactory written references.
5. That you will supply a photograph of yourself for retention in your records.

6) Evidence of physical or mental suitability for your work. |

**DECLARATION (Please read carefully before signing this application)**

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| 1. I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.
2. Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law requires us to inform you of our intention and obtain your permission prior to contacting your doctor. I agree that the organisation reserves right the right to require me to undergo a medical examination. In addition, I agree that this information will be retained in my personnel file during employment and for up to six years thereafter and understand that information will be processed in accordance with the Data Protection Act.
3. I agree that my previous employers may be approached for references. I also agree that should I be successful in this application, I will, if required, apply to the Criminal Records Bureau/Scottish Criminal Records Office for a standard or enhanced (as appropriate) disclosure. I understand that should I fail to do so, or should the disclosure or reference not be satisfactory, any offer of employment may be withdrawn or my employment terminated.

Signed: …………………………………………………………………………………………..Date: …………………………………………………………………………………………….. |

**EQUAL OPPORTUNITES MONITORING FORM**

# PRIVATE & CONFIDENTIAL Form EO(A)

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Position applied for: ……………………………………………….….. Ref No: ……………. (Office use only)

We are an equal opportunity employer. The aim of our policy is to ensure that no job applicant or employee receives less favourable treatment on the grounds of race, colour, ethnic or national origin, religious belief, sex, marital status, sexual orientation, gender reassignment, age or disability, or is disadvantaged by conditions or requirements which cannot be shown to be justifiable.

Our selection criteria and procedures are frequently reviewed to ensure that individuals are selected, promoted and treated on the basis of their relevant merits and abilities.

All employees are given equal opportunity and are encouraged to progress within the organisation.

We are committed to an ongoing programme of action to make this policy fully effective. To ensure that this policy is fully and fairly implemented and monitored, and for no other reason, would you please provide the following information:-

**Date of Birth:** …………………………………………

**I would describe my ethnic group and sex as:- (please tick one box for your ethnic group and one box for your sex)**

1. **White**

English Scottish

 Welsh Irish

* Any other White background, please specify………………………………..…..
1. **Mixed**

 White and Black Caribbean  White and Black African

 White and Asian

 Any other Mixed background, please specify ……………………………………..…………..

1. **Asian, Asian British, Asian English, Asian Scottish or Asian Welsh**

 Indian  Pakistani

 Bangladeshi

 Any other Asian background, please specify ……………………………………..…………..

1. **Black, Black British, Black English, Black Scottish or Black Welsh**

 Caribbean  African

 Any other Black background, please specify ……………………………………..…………..

1. **Chinese, Chinese British, Chinese English, Chinese Scottish, Chinese Welsh or other Ethnic Group**

 Chinese

 Any other background, please specify ………………………………………..…..…………..

1. **Sex**

 Male Female

**Name: ………………………………………………….. Signed: ……………………………………..**

Date: ……………………………………………………