**JOB APPLICATION FORM**

***Please complete this Application Form in black ink then return it to the Main Office***

|  |
| --- |
| **PERSONAL INFORMATION** |

**DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **Title** |  |
| **Surname** |  |
| **Forename** |  |
| **Address** |  |
| **Postcode** |  |
| **Email address** |  |
| **Phone number** |  |
| **National Insurance Number** |  |
| **Nationality** |  |
| **Eligibility to work in the UK** | **Visa Status:**  **Expiry Date:** |
| **Pre-settlement Expiry date:**  **Indefinite leave to remain**  **Please provide the share code:** |
| **NHS Number** |  |
| **Anti-Covid vaccination details**  You need to provide evidence for the above if you will be employed by us | **Date for Dose 1:**  **Date for Dose 2:**  **Date for booster (if done):** |
|  |  |
|  |  |
|  |  |
|  |  |
| **EMPLOYMENT ASPIRATION** | |

|  |  |
| --- | --- |
| **Position** |  |
| **Starting date** |  |
| **Job flexibility**  Please tick | Full-time Part-time Bank staff |
| **Outstanding holiday dates** |  |

|  |
| --- |
| **EDUCATION** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Education** (i.e.: high school, college, university) | **Name and school location** | **Number of years attended** | **Did you graduate?** If **Yes**, please provide the date | **Qualification** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |
| --- | --- |
| **TRAINING AND DEVELOPMENT** | |
| Please use the space below to give details of any training or non-qualification-based development which is relevant to the post and supports your application. | |
| **Training Course** | **Course Details**  **(Including length of course/nature of training)** |
|  |  |

|  |
| --- |
| **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)** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date (month and year)** | **Name and address of employer** | **Position** | **Salary** | **Reason for leaving** |
| **From:** |  |  |  |  |
| **To:** |
|  |  |  |  |  |
| **From:** |  |  |  |  |
| **To:** |
|  |  |  |  |  |
| **From:** |  |  |  |  |
| **To:** |
|  |  |  |  |  |
| **From:** |  |  |  |  |
| **To:** |
|  |  |  |  |  |
| **From:** |  |  |  |  |
| **To:** |
|  |  |  |  |  |
| **From:** |  |  |  |  |
| **To:** |
|  |  |  |  |  |
| **From:** |  |  |  |  |
| **To:** |

|  |
| --- |
| **REFERENCES**  Please give details of two references – see guidance sheet for further information.  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. **Please make sure that you have given the full contact details of your referees so that this does not delay processing reference requests**. |

|  |  |  |  |
| --- | --- | --- | --- |
| **REFERENCE 1** | | **REFERENCE 2** | |
| 1. | Title: | 2. | Title: |
| Name & Surname: | Name & Surname: |
| 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 |



|  |
| --- |
| INFORMATION IN SUPPORT OF YOUR APPLICATION (i.e.: why are you applying for this position?) |

|  |
| --- |
|  |

|  |
| --- |
| CONVICTIONS/ DISQUALIFICATIONS |
| Rehabilitation of Offenders Act 1974 (Exceptions)(Amendment) Order 1986We would draw your attention to the following statement: 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 |  |   **If YES, please give details.**  Do you give permission for a [Disclosure and Barring Service (DBS) check](https://www.gov.uk/criminal-record-checks-apply-role)?   |  |  |  |  | | --- | --- | --- | --- | | Yes |  | No |  |   \*If your answer is No, we will not be able to proceed further with your application. |
| 7. Reasonable adjustments/Arrangements for interview |
| Please contact us if you need the application form in an alternative format including large print. |

If you need us to make any adaptations for your interview to accommodate any disability you may have, please tell us what these should be?

|  |
| --- |
|  |

**If successful with this application, when could you start? Give period of notice if applicable**

|  |
| --- |
|  |

|  |
| --- |
| Declaration |

|  |  |
| --- | --- |
| Statement to be signed by the applicant  Please complete the following declaration and sign it in the appropriate place below. If this declaration is not completed and signed, your application will not be considered. I agree that Villa Scalabrini Residential Care Home can create and maintain computer and paper records of my personal data and that this will be processed and stored in accordance with the Data Protection Act 1998. **I confirm that all the information given by me on this form is correct and accurate and I understand that if any of the information I have provided is later found to be false or misleading, any offer of employment may be withdrawn, or employment terminated.**  **Print name**   |  | | --- | |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Signed:** |  | **Date:** |  |
|  |

**SPECIAL REQUIREMENTS (CARE SECTOR)**

|  |
| --- |
| 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. |

##### **Guidance sheet**

Please read through the following guidelines that will help you complete the application form.

* Complete all sections of the form.
* Make sure the form is tidy and try to avoid mistakes by writing out a version first to make sure you are happy with the information you are providing. Always read through your final version before you send it.

To complete your application:

* Please type or write clearly in black or blue ink.
* Ensure you clearly state the job title you are applying for.
* In the ‘Employment history’ section you must state why you have left a position.
* Always explain any gaps in work history.
* Proof of qualifications and membership to professional bodies may be required at a later stage

**References**

We will take up professional references once you have been interviewed and **provisionally** offered the post. Please make sure that you have given the full contact details of your referees so that this does not delay processing reference requests.

If you have no employer references, we will take up references with named individuals at colleges where you have studied, or people who know you in a professional capacity. Please do not put down family members or people you live with as referees.

You will only be confirmed in the post once we are satisfied with the information received from your referees.

###### **Supporting Statement**

The 'Why you feel you are suitable for this position' part of the form is called your *supporting statement*. It is the most important part of the application form.

You should consider the following:

* Applications can only be assessed on the information you provide. You need to clearly demonstrate your capabilities.
* Honesty is always the best policy; please do not make false claims.
* If you are making a career change, stress what skills are transferable to the role you are applying for

**EQUAL OPPORTUNITES MONITORING FORM**

**PRIVATE & CONFIDENTIAL Form EO(A)**

**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 favorable treatment on the grounds of race, color, 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 program 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: ………………………………………………….. Signature: ……………………………………..

Date**: ……………………………………………………**