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|  **APPLICATION FOR EMPLOYMENT** |  Form AP2H(A)  |

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| PRIVATE & CONFIDENTIAL **Return this form to:**  |
| **POSITION APPLIED FOR \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ref No: ……………..** |
| Title: |  |
| Surname: |
| Forename(s): |
| Address:Postcode:E-mail address: |
| Tel. Nos (please include code): (Home)(Work)(Mobile) |
| Current driving licence? Yes/NoGroups: Expiry Date:Details of any endorsements: |   |
| NI No. |
| Are there any restrictions on you taking up work in the UK? Yes/No(If yes please provide details) |  |

## 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 |

**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 | Job Title & Main Duties/Responsibilities | Type of Business | Period of Employment |
|  |  |  | From:To:Reason for leavingNotice Period Required |
|  |  |  | From:To:Reason for leaving |
|  |  |  | From:To:Reason for leaving |
|  |  |  | From:To:Reason for leaving |
|  |  |  | From:To:Reason for leaving |

# EDUCATION AND QUALIFIATIONS

Please give details of your education and the qualifications obtained. Primary school details are not required.

|  |  |  |
| --- | --- | --- |
| **Name of school, college, university etc.**  | **Qualifications and levels achieved**  | **Dates attended**  |
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**TRAINING**

Please give details of any training you have had, which may support your application

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| --- | --- | --- |
| **Title of training programme/course** and brief description  | **Certificates/qualifications gained**  | **Dates attended**  |
|  |  |  |

# PROFESSIONAL ASSOCIATION MEMBERSHIP

|  |  |  |
| --- | --- | --- |
| **Name of professional association**  | **Year of membership**  | **Grade/level**  |
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**PERSONAL STATEMENT**

# We will shortlist candidates for interview based on the criteria listed on the person specification. Please use the space below to go through each point of the person specification and tell us how your skills, knowledge, experience and abilities correspond to the criteria we have listed. If you need to you may continue for up to 2 more additional sheets of A4 paper. Please do not send in CVs as these will be disregarded

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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. |
|  | May we approach the above prior to interview? Yes/No |  | May we approach the above prior to interview? Yes/No |

**CAUTIONS, REHABILITATIONS AND CRIMINAL RECORDS**

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 Disclosure and Barring check. Any disclosure made by the Disclosure and Barring Service 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)

Because this position involves the care of children and/or vulnerable adults employment is dependent on the following:

1. Provision of a Disclosure and Barring certificate from the Disclosure and Barring Service.
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 including one from your most recent employer **(this is a Legal Requirement)**.
5. That you will supply a recent photograph of yourself for retention in your records **(this is a Legal Requirement)**.
6. Evidence of physical or mental suitability for your work.

Documentary evidence of any qualifications relevant for the position (this is a Legal Requirement).

**DECLARATION**

I certify that, to the best of my knowledge and belief, the information I have provided on this form is true and accurate and agree they should form the basis of any future employment. I understand that if the information I have supplied is false or misleading in any way, it may disqualify me from appointment or render me liable to dismissal.

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

***Thank you for the time you have taken to complete this form. Please also complete the Recruitment Analysis Form below.***

**Recruitment Analysis Form**

The information you supply will be separated from your application upon receipt. This information is not part of your application and will not be used in any part of the selection process. It will not be seen by the interviewers or those involved in the shortlisting your application. This information will be stored anonymously and confidentially. Please complete as much as you can.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Position applying for:**

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1. **Where did you see this post advertised or how did you learn of this position?**

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1. **Gender**

Female 🗌Male 🗌Prefer not to say 🗌 If you prefer to use your own term please provide this here:

|  |
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1. **Gender Identity**

Is your gender identity the same as the gender you were assigned at birth?Yes 🗌No 🗌Prefer not to say 🗌 1. **Sexual Orientation:**

Bisexual 🗌Gay man 🗌Gay woman/lesbian 🗌Heterosexual/straight 🗌Prefer not to say 🗌 If you prefer to self describe, please give details here:

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1. **Disability:**

Do you consider yourself to have a disability?Yes 🗌No 🗌Prefer not to say 🗌  | 1. **Date of Birth:**

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|  |

1. **Nationality:**

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|  |

1. **Ethnicity**:

Asian: 🗌Black: 🗌Mixed: 🗌White: 🗌Another: 🗌Prefer not to say 🗌 If you would prefer to self describe, please give details here:

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1. **Religion and Belief**

Buddhist 🗌Christian 🗌Jewish 🗌Muslim 🗌Non-religious (Atheist etc) 🗌Sikh 🗌Prefer not to say 🗌 If you prefer to use your own definition please provide details here:

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