



Application Form

To be completed in typed form or in your own handwriting in black ink

Please refer carefully to the job description and person specification. If the space provided is insufficient please continue on a separate sheet.

Post Applied for:	<input type="checkbox"/> Registered Manager <input type="checkbox"/> Senior TICW <input type="checkbox"/> Deputy Manager <input type="checkbox"/> TICW <input type="checkbox"/> Other; (please state) _____
Preferred Hours:	<input type="checkbox"/> Full Time <input type="checkbox"/> Bank (Casual) Staff <input type="checkbox"/> Are you able to work weekends? <input type="checkbox"/> Are you able to do sleepovers?
How did you hear of this vacancy:	

Personal Details	Title: _____	
Forename(s) or other names	_____	
Surname	_____	
Address	_____	

	Postcode:	_____
Telephone	Home: _____	Work: _____
	Mobile: _____	
Email Address	_____	
Car Driver: <input type="checkbox"/> Yes <input type="checkbox"/> No	Car Owner: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Number of years license has been held?	_____	
Do you have any endorsements on your licence?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
if so, please outline below:		
Do you have business insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you willing to obtain business insurance? <i>This is for the purposes of travelling to training and other venues, you are not expected to transport children</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Are you a UK or EU/EEA national? <i>If so you will need to provide proof of this at your interview</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If you are not a UK or EU/EEA national can you provide proof of permission to work in the UK?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If you cannot provide proof of permission to work in the UK we cannot accept your application as you are unable to work legally in the UK.		Hours permitted to work: Expiry Date:	
If you can provide proof of permission to work please state the nature of your permission to work in the UK, any restrictions on the hours you are permitted to work and the expiry date of the permission.		We will require sight of the documentation which confirms that you are permitted to work in the UK at the interview stage. We may need to take a copy of the document and to carry out checks to authenticate it.	
Employment History		Present or most recent employment (paid or unpaid) <i>This includes any roles prior to moving to the UK (if applicable)</i>	
Employer Name, Address including Post Code and Telephone Number	Date(s) employed	Position(s) held and salary	Reason for leaving
Outline of Duties and Responsibilities			
Number of weeks require for notice including any annual leave to be taken at the end			
Previous Employment		Please list in chronological order, with your most recent post listed first, including temporary, casual and short term jobs (Please give your full employment history since leaving school. If you require extra space please attach an additional sheet)	
Employer Name, Address including Post Code and Telephone Number	Date(s) employed	Position(s) held and salary	Reason for leaving
Outline of Duties and Responsibilities			

Employer Name, Address including Post Code and Telephone Number	Date(s) employed	Position(s) held and salary	Reason for leaving

Outline of Duties and Responsibilities

Employer Name, Address including Post Code and Telephone Number	Date(s) employed	Position(s) held and salary	Reason for leaving

Outline of Duties and Responsibilities

Employer Name, Address including Post Code and Telephone Number	Date(s) employed	Position(s) held and salary	Reason for leaving

Outline of Duties and Responsibilities

Gaps in Employment		Please give details of all periods when not in employment, giving dates and reasons	
Dates from:	To:	Reason:	
Dates from:	To:	Reason:	
Dates from:	To:	Reason:	
Dates from:	To:	Reason:	
Disciplinary	Have you ever been dismissed from a previous post or had an employment contract terminated for any reason including redundancy? If so please give details below:		
Have you been subject to disciplinary action in your current or any previous posts? (including being the subject of any disciplinary process not yet concluded to resignation) If yes, please give details:			
Voluntary Work Experience		<i>Give details of any voluntary or unpaid experience including care of others</i>	
Language Skills		<i>List all languages spoken fluently and those in which you have a good working knowledge</i>	

General Education			Qualifications Achieved
School/College	From	To	Subject/courses studied, level and grade (e.g., GCSE, 'A' Level, GNVQ etc)

Further and Higher Education			Qualifications Achieved
College/University	From	To	Subject/courses studied, level and grade (eg, BA History 2:1)
Professional Training			Qualifications Achieved
College/University	From	To	Subject/courses studied, level and grade (e.g., BA Social Work/Dip SW 2:1)
Professional Membership of Registered Bodies			Registration No/Renewal Date
Name of Professional Body and Level of Membership	Date		Nurses, please give PIN No. Social Workers please give GSCC Registration No
NVQs / QCFs and other work-related qualifications			Qualifications Achieved
College/Training Provider	From	To	Awarding body, level and grade if applicable (eg, Edexcel NVQ 4 Pass)
Other vocational and work related training undertaken			
List subjects, e.g., First Aid	Duration (e.g., 1 day)		Level (if appropriate)

Please tell us why you are applying for this post and why you want to work with us	If in current employment, please explain why you are looking for a new post:
Do you have any restrictions in your working hours or availability?	Please note our requirements in respect of working hours as detailed within the job description
Additional Supporting Information	What experience have you gained in your current and previous jobs and general life experience, which you feel would be relevant to the job you are applying for? The job description and person specification outline the values, knowledge and experience, skills and other abilities, required for this post and the organisation. Continue on a separate sheet if necessary.

References	<p>Please supply the names and addresses of two professional referees who have agreed to provide a reference. <u>It is essential that one of your referees must be your current or most recent employer*</u> and that your referee is/was your line manager and <u>not a colleague, relative or friend.</u> Both references cannot be from the same company. References will be verified to ensure authenticity.</p> <p>Failure to provide the above can result in your application being withdrawn. *If previously self-employed, please provide two professional referees and detailed information regarding your self-employment</p>		
Current employer or most recent employer details	Company		
(Business Addresses)	Name		
	Position		
	Address		
		Post Code:	
	Tel		
	Fax		
	Email		
	Can this reference be contacted prior to interview Yes / No		
Previous employer (if not applicable an academic referee)	Company		
(Business Addresses)	Name		
	Position		
	Address		
		Post Code:	
	Tel		
	Fax		
	Email		
	Can this reference be contacted prior to interview Yes / No		
<u>* Unless indicated otherwise all referees will be contacted following your invite to individual interview.</u>			

<p>Have you ever been convicted of any criminal offence? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please note that all positions are subject to an enhanced DBS check. You will be asked to declare all criminal convictions in further details if an offer of employment is made.</p>

DATA PROTECTION ACT

In accordance with the Act, you should be aware that the personal details submitted with this application form will be used only for selection and interview procedures; and for employment records if the application is successful.

DECLARATION

I declare that, to the best of my knowledge and belief, all statements contained in this form are correct and I understand that should I conceal any material fact, I will, if engaged, be liable to the termination of my contract of service with such notice as may be appropriate.

Signature: _____ **Date:** _____