**Recruitment Process**

Candidates must complete all sections of the application form, if a section or question does not apply to you please write N/A (non-applicable) in the relevant section. Applicants must submit an up to date CV with their application form and provide copies of all necessary supporting documents. Any offer of employment will be subjected to a satisfactory health review, two reference checks and a DBS (Disclosure & Barring Service) register check.

Caring Lane’s recruitment process has four stages.

|  |  |
| --- | --- |
| **Stage** | **Process** |
| 1. **Application**
 | Submission of application form, CV and any necessary supporting document. |
| 1. **Interview**
 | Following a review of your application form, CV and documents, successful applicants will be invited to an interview with management and a senior member of the admin team.  |
| 1. **Security and health check**
 | Applicants that are successful at the interview stage will be subjected to a DBS Register check, two reference and a health review. |
| 1. **Offer of employment**
 | A formal offer of employment will be made, candidates will receive their offer of employment starter pack, this must be completed and sent back before paid work can commence. |

**Assistance with interview and Application**

**Do you require any special arrangements to be made in order for you to participate in the recruitment process? For example, large print forms? Yes** [ ]  **No** [ ]

**If yes, please give details below**

|  |
| --- |
| Click or tap here to enter text. |

 **Personal Information**

|  |  |
| --- | --- |
| **Job applied for** | Carer  |
| **First name** | Click or tap here to enter text. |
| **Surname** | Click or tap here to enter text. |
| **Phone number** | **Mobile** | Click or tap here to enter text. | **Home** | Click or tap here to enter text. |
| **Email address** | Click or tap here to enter text. |
| **Current address** | **Address line 1**  | Click or tap here to enter text. |
| **Address line 2**  | Click or tap here to enter text. |
| **County**  | Click or tap here to enter text. |
| **Country** | UK |
| **Post code**  | Click or tap here to enter text. |
| **Own vehicle** | **Do you have a vehicle?**  | **Yes** [ ]  **No** [x]  |
| **Do you have a drivers licence?** | **Yes** [x]  **No** [ ]  |
| **How long have you held your licence?**  | **Since (date)** Click or tap to enter a date. |
| **Do you have any endorsements?**  | **Yes**  [ ]  **No** [ ]  **If yes give details below** |
| Click or tap here to enter text. |
| **Languages you speak****Please state how fluent your spoken, reading and writing skills are for each language you speak.**  | Click or tap here to enter text. |
| **Please list any days/times that you are unavailable for an interview in the next 3 weeks?** |  |

 **Formal Education**

**Successful applicants must provide original copies of course certificates.**

|  |  |  |
| --- | --- | --- |
| **Name of School/College/University** | **Course Name** | **Result** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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 Training/Courses/Professional Status

**Successful applicants must provide original copies of course, training certificates and proof of professional membership.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Title of course, training attended or professional status** | **Details of subject or modules covered** | **Result if applicable** | **Date completed** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap to enter a date. |
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 **Work Experience**

**Starting with your current or most recent job please provide details of your work history. Continue on a separate sheet if necessary.**

|  |  |
| --- | --- |
| **Employer/company name** | Click or tap here to enter text. |
| **Position held** | Click or tap here to enter text. |
| **Sector** | Click or tap here to enter text. |
| **Full address** | Click or tap here to enter text. |
| **Date of employment** | Click or tap to enter a date. | **To** | Click or tap to enter a date. |
| **Reason for leaving** | Click or tap here to enter text. |
| **Summary of responsibilities** |
| Click or tap here to enter text. |

|  |  |
| --- | --- |
| **Employer/company name** | Click or tap here to enter text. |
| **Position held** | Click or tap here to enter text. |
| **Sector** | Click or tap here to enter text. |
| **Full address** | Click or tap here to enter text. |
| **Date of employment** | Click or tap to enter a date.  | **To** | Click or tap to enter a date. |
| **Reason for leaving** | Click or tap here to enter text. |
| **Summary of responsibilities**Click or tap here to enter text. |
| Click or tap here to enter text. |

 **Work Experience**

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| **Employer/company name** | Click or tap here to enter text. |
| **Position held** | Click or tap here to enter text. |
| **Sector** | Click or tap here to enter text. |
| **Full address** | Click or tap here to enter text. |
| **Date of employment** | Click or tap to enter a date.  | **To** | Click or tap to enter a date. |
| **Reason for leaving** | Click or tap here to enter text. |
| **Summary of responsibilities**Click or tap here to enter text. |
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| **Employer/company name** | Click or tap here to enter text. |
| **Position held** | Click or tap here to enter text. |
| **Sector** | Click or tap here to enter text. |
| **Full address** | Click or tap here to enter text. |
| **Date of employment** | Click or tap to enter a date.  | **To** | Click or tap to enter a date. |
| **Reason for leaving** | Click or tap here to enter text. |
| **Summary of responsibilities**Click or tap here to enter text. |
| Click or tap here to enter text. |

 **Work Experience**

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| **Employer/company name** | Click or tap here to enter text. |
| **Position held** | Click or tap here to enter text. |
| **Sector** | Click or tap here to enter text. |
| **Full address** | Click or tap here to enter text. |
| **Date of employment** | Click or tap to enter a date.  | **To** | Click or tap to enter a date. |
| **Reason for leaving** | Click or tap here to enter text. |
| **Summary of responsibilities**Click or tap here to enter text. |
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| **Employer/company name** | Click or tap here to enter text. |
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| **Sector** | Click or tap here to enter text. |
| **Full address** | Click or tap here to enter text. |
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| **Reason for leaving** | Click or tap here to enter text. |
| **Summary of responsibilities**Click or tap here to enter text. |
| Click or tap here to enter text. |

 **Work Experience**

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| **Position held** | Click or tap here to enter text. |
| **Sector** | Click or tap here to enter text. |
| **Full address** | Click or tap here to enter text. |
| **Date of employment** | Click or tap to enter a date.  | **To** | Click or tap to enter a date. |
| **Reason for leaving** | Click or tap here to enter text. |
| **Summary of responsibilities**Click or tap here to enter text. |
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| **Summary of responsibilities**Click or tap here to enter text. |
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 **Work Experience**

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| --- | --- |
| **Employer/company name** | Click or tap here to enter text. |
| **Position held** | Click or tap here to enter text. |
| **Sector** | Click or tap here to enter text. |
| **Full address** | Click or tap here to enter text. |
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| **Reason for leaving** | Click or tap here to enter text. |
| **Summary of responsibilities**Click or tap here to enter text. |
| Click or tap here to enter text. |

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| **Employer/company name** | Click or tap here to enter text. |
| **Position held** | Click or tap here to enter text. |
| **Sector** | Click or tap here to enter text. |
| **Full address** | Click or tap here to enter text. |
| **Date of employment** | Click or tap to enter a date.  | **To** | Click or tap to enter a date. |
| **Reason for leaving** | Click or tap here to enter text. |
| **Summary of responsibilities**Click or tap here to enter text. |
| Click or tap here to enter text. |

 **Employment Continuity Check**

**Please state the reason for any gaps in your work history. Continue on a separate sheet if necessary.**

|  |  |  |
| --- | --- | --- |
| **Break start date** | **Break end date** | **State the reason for any breaks in your work history** |
| Click or tap to enter a date. | Click or tap here to enter text. | Click or tap here to enter text. |
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 **Care Standards**

**Please answer all of the following questions.**

|  |
| --- |
| **What is the purpose of domiciliary (home) care?**  |
| Click or tap here to enter text. |
| **What personal qualities does a carer need in order to maintain a good relationship with their client?** |
| Click or tap here to enter text. |
| **How would a carer maintain the dignity of their client and show that they respect them?** |
| Click or tap here to enter text. |

 **Care Standards**

|  |
| --- |
| **What do you think are the main challenges a carer faces at work?** |
| Click or tap here to enter text. |
| **From time to time two or more carers will be required to care for a client, how would you as a carer ensure that you work well as part of a team?** |
| Click or tap here to enter text. |
| **How would you expect a domiciliary care provider to handle confidential information?** |
| Click or tap here to enter text. |

 **Availability**

|  |
| --- |
| **Please specify what day and times you can work** |
| **Monday** | Click or tap here to enter text. |
| **Tuesday** | Click or tap here to enter text. |
| **Wednesday** | Click or tap here to enter text. |
| **Thursday**  | Click or tap here to enter text. |
| **Friday** | Click or tap here to enter text. |
| **Saturday**  | Click or tap here to enter text. |
| **Sunday** | Click or tap here to enter text. |
| **What is the maximum number of hours you are willing to work each week?**  | Click or tap here to enter text. |

**References**

**Please provide references from your two most recent employers. Alternatively, if you have only had one employer, you can provide one work and a character reference. If you cannot provide any work references, please provide two character references. Character references must not be family relatives. All referees will be contacted, therefore please inform both referees that you have used their name. If you are unable to provide the required references, please discuss the matter with us.**

**Referee 1**

|  |  |
| --- | --- |
| **Full name and title** | Click or tap here to enter text. |
| **Relationship to you** | Click or tap here to enter text. |
| **Job title** | Click or tap here to enter text. |
| **Company name** | Click or tap here to enter text. |
| **Full address** | Click or tap here to enter text. |
| **Telephone number** | Click or tap here to enter text. |
| **Email address** | Click or tap here to enter text. |
| **Permission to contact referee** | **I give Caring Lane permission to contact the above referee before an offer of employment is made.**  | **Yes** [x]  **No** [ ]  |

 **Referee 2**

|  |  |
| --- | --- |
| **Full name and title** | Click or tap here to enter text. |
| **Relationship to you** | Click or tap here to enter text. |
| **Job title** | Click or tap here to enter text. |
| **Company name**  | Click or tap here to enter text. |
| **Full address** | Click or tap here to enter text. |
| **Telephone number** | Click or tap here to enter text. |
| **Email address** | Click or tap here to enter text. |
| **Permission to contact referee** | **I give Caring Lane permission to contact the above referee before an offer of employment is made.**  | **Yes** [ ]  **No** [ ]  |

**Additional Information**

**Please add any additional information that you were unable to fit on previous pages.**

|  |
| --- |
| Click or tap here to enter text. |

**Additional Information**

**Please add any additional information that you were unable to fit on previous pages.**

|  |
| --- |
| Click or tap here to enter text. |

 **Criminal Record**

**As part of the Health and Social Care Act 2008, Caring Lane must carry out police record (DBS) check on all employees prior to registering with us. Please declare all criminal convictions, whether spent or not, charges, whether proceeded with or not, warnings and cautions. Please note that you will not be eligible for work with us if you are on the DBS register.**

|  |
| --- |
| Click or tap here to enter text. |

**Declaration**

**I declare that to the best of my knowledge and belief the information given by me in this application is true, and I understand that the above information forms the basis of my contract of employment. I understand that if any of the information supplied by me is found to be falsely declared, my contract may have been fundamentally breached and my employment may be terminated immediately.**

**I understand that I cannot be offered a post until a satisfactory response has been received with respect to my DBS Register status, and that should I subsequently be offered a post, that offer will be subjected to receipt of two satisfactory references. I understand that until a satisfactory response is received from the DBS Register, and my employment is confirmed, I will be supervised at all times at work, and will not seek or have unsupervised access to vulnerable people. If the post I have applied for is as a Registered Nurse, my confirmation of employment will also be subject to a satisfactory search of the Nursing and Midwifery Council records and registers. By my signature, I authorise Caring Lane to request a criminal record check from the DBS Register, on initial employment and at any time during my employment thereafter. I undertake to inform my employer immediately if my DBS Register or criminal status changes at any time during my employment, such as by being charged with an offence, the administering of a warning, criminal conviction, referral to any register of barred Care workers, or withdrawal of any registration required by my employment status.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant Signature** |  | **Date** | **04/03/2022** |