



APPLICATION FORM

1 Position Applied For:

2 Name:

Date of birth:

Preferred Title:

Other names by which you have been known:

3 Address:

Telephone Number: _____

Email: _____

4 Do you have your own transport?

5 Qualifications:

6 Other Relevant Courses Completed:



7 Work History (Please note that references may be sought from any of your previous employers)

From (Month and Year)	To (Month and Year)	Name and address of Employer	Type of Business	Position Held	Reason for Leaving

(Continue on separate sheet if necessary)



8 Breaks in employment history

From: _____ **To:** _____ **Reason:** _____

From: _____ **To:** _____ **Reason:** _____

From: _____ **To:** _____ **Reason:** _____



9 Absence

How many days absence from work have you had as a result of ill health over the last 3 years? (Please circle the range that applies to you)

0 – 3

4 – 10

11 – 20

21 – 29

30+

You may give brief details if you wish

10 Disability

Do you suffer from any disability, illness or injury that might affect your performance of the tasks associated with this position? If yes, please give details (Note: Equal employment opportunity guidelines apply to the consideration of this information.)

11 Disciplinary or grievance procedures

Have you been the subject of either disciplinary or grievance procedures in any of your previous employment? Yes/No
Please give details

12 Complaints

Have you ever been the subject of a complaint made by a service user, member of the public or colleague? Yes/No

If Yes, give details



13 Records Check

Have you been convicted of any criminal offence (including driving offences)?
Yes/No

If yes, give details:

Are you presently the subject of a criminal investigation? Yes/No.

If yes, give details:

The disclosure of a criminal record will not debar you from appointment unless the selection panel considers that the conviction renders you unsuitable for appointment. **However, this post is exempted employment within the terms of the Rehabilitation of Offenders Act 1974 (Exemptions) Order, as amended. You are therefore required to declare any convictions, whether or not they would, in terms of the Act, be classed as spent.**

Failure to disclose important information may disqualify you from appointment or lead to summary dismissal

If selected for the position, we will check your details against the Department of Health Consultancy Service and criminal records held by the Police, prior to an offer of employment.

14 Special Skills and Relevant Life Experience

Please detail any special knowledge, skills or experience that you consider are relevant to your application for this position. Take as a guide the contents of the Job Description and the Person Specification. You may go into as much detail as you wish, and attach up to two separate pages.



15 Referees

Please give the names of two referees who can be contacted in reference to your application. Relevant work referees are preferred, and one should be your present or most recent employer. In selecting your referees, please select as far as possible people who are able to speak objectively about your suitability for the position.

1. Name _____ Occupation _____
Address _____
Telephone (Business) _____ Telephone (Home) _____

2. Name _____ Occupation _____
Address _____
Telephone (Business) _____ Telephone (Home) _____

I certify that my answer to each of the above questions is true and that the information provided is correct.

Applicant's signature _____

Date _____