

Application Form



Please complete this form accurately, giving as many details as possible of your skills and experience relating to this job application. Short listing will be based on the information gathered from this form, read in conjunction with the person specification.

Please print clearly in black ink
Answer all questions honestly and truthfully
Read the Declaration, sign and date the form and return it to the HR Department

Post applied for

Personal Details

Full Name	
Any previous name	
Address	
Post Code	
Email	How long at this address?
Nat Ins No.	Telephone (Home)
Nationality	Telephone (Mobile)
Next of Kin	Telephone (Work)
Relationship to you	Telephone (N of K)

Reason for Application

Please include the reason for leaving your current employer

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Education

If you need further space, please continue on a separate sheet

Secondary School	From
	To
Qualifications	
Further/Higher Education College/University	From
	To
Qualifications	

Professional Training

If you need further space, please continue on a separate sheet

Professional/Vocational Training Provider	From
	To
Professional/Vocational Qualifications	
Professional/Vocational Training Provider	From
	To
Professional/Vocational Qualifications	

Training Courses

Please provide information on training courses undertaken while at work, that you feel are most relevant to this appointment

Title or Subject of Course	Year undertaken

Employment History

Identify all employers, starting with your current/most recent. Any gaps must be explained.

Current Employer (name & address)	From
	To
	Telephone no.
Post code	
Position held	
Duties/achievements	Salary
	Notice period

Employer (name & address) Post code	From
	To
	Telephone no.
Position held	
Duties/achievements	
Reason for leaving	
Employer (name & address) Post code	From
	To
	Telephone no.
Position held	
Duties/achievements	
Reason for leaving	
Employer (name & address) Post code	From
	To
	Telephone no.
Position held	
Duties/achievements	
Reason for leaving	
Employer (name & address) Post code	From
	To
	Telephone no.
Position held	
Duties/achievements	
Reason for leaving	
Employer (name & address) Post code	From
	To
	Telephone no.
Position held	
Duties/achievements	
Reason for leaving	

Your employment history must be complete and go back at least ten years or until your full-time education. If you need more space, continue on a separate sheet giving the above information for each employer.

Relevant Skills and Knowledge

Please give details of relevant skills, experience and knowledge demonstrating how you meet the requirements of the post. For each item in the person specification, give examples from your past employment, interests, voluntary work or life experience. In particular, please give details of any experience of working in a 1:1 care setting or where you have had to be reliant on your own resources.

Additional Information

Please provide any additional information that you feel is relevant to your application.

Driving Licence

Most of our posts involve driving. For insurance purposes, it is important we have the following information.

Do you hold a full, valid car driving licence?	Yes / No	How long have you held a full licence?
Do you have your own transport?	Yes / No	
Any driving convictions or endorsements?	Yes / No	
If yes, please give details, including dates and points penalties		

Criminal Offences

Under the Rehabilitation of Offenders Act 1974, you must disclose all previous convictions (including spent convictions), as our work involves caring for children. Please note that failure to disclose fully will disqualify you from appointment and, if appointed, render you liable to immediate dismissal without notice.

Have you ever been convicted of any criminal offence? (Other than driving)	Yes / No
If yes, please give details, including dates	

Disqualification from Caring for Children Regulations

Almost all our posts are covered by the Disqualification from Caring for Children Regulations (1991). You are therefore required to complete this section before you can be considered.

Has a child of yours at any time been the subject of a care order?	Yes / No
Has an order been made at any time for the purpose of removing a child from your care or preventing a child living with you?	Yes / No
Have you ever been concerned with a voluntary or registered home that has been removed from the register?	Yes / No
Has an application made by you for registration of a voluntary or registered home ever been refused?	Yes / No
Have you ever been prohibited from being a private foster parent?	Yes / No
Have you ever been refused registration to be a child minder or provider of day care, or had your registration as either of these cancelled?	Yes / No
If yes to any of the above, please give details, including dates	

Eligibility to Work

To comply with the Asylum & Immigration Act 1996, if you are invited to attend an interview, you must bring with you evidence of your eligibility to work in the UK. Acceptable documents include your passport, ID card or other travel document or, if none of these is available, your birth certificate and a document giving your National Insurance Number, such as a P45, P60 or payslip.

Any offer of employment will be withdrawn or revoked unless such evidence has been produced.

Are you eligible for employment in the UK, in accordance with the above Act?	Yes / No
Do you have proof of eligibility to work in the UK?	Yes / No
Do you need to register under the Workers Registration Scheme?	Yes / No
Do you require a Work Permit to work in the UK?	Yes / No
If so, please give Work Permit number	

Other

Have you ever been subject to bankruptcy proceedings?	Yes / No
Do you currently have any County Court judgements against you?	Yes / No
If yes to either, please give details, including dates	
Are you involved in any public duties (e.g. local councillor/JP)	Yes / No
Do you know any current or past member of our staff?	Yes / No
If yes to either, please give details	
How did you learn about this vacancy?	

Health

Please note that we may require applicants to undergo a full medical examination as a condition of their employment. Also, in making this application you are consenting to us approaching your doctor for medical information about you, either as part of the recruitment process or at any time in your employment with us.

What is your general state of physical health?	Excellent / good / variable / fair / poor
What is your general state of mental health?	Excellent / good / variable / fair / poor
How many days of work/education have you missed in the last 12 months due to illness/injury?	
Please give brief details	
Please provide details of any recurring or on-going illness, including any period of hospitalisation, during the past three years	
Do you have any disabilities that may affect your work with us?	Yes / No
Please indicate if you require any assistance at interview, due to disability	Yes / No
Do you have any allergies which may affect your application?	Yes / No
Do you consider yourself disabled?	Yes / No
Are you registered disabled?	Yes / No
Please give brief details, including ways in which we could assist	
Name of General Practitioner	Address
Tel no.	
I confirm that I give permission for medical information to be requested from my GP	
Signed	Date

Referees

Please give the name and full address of three referees not related to you. The first referee MUST be a senior manager from your present or most recent employer. The other referees must be able to comment on your ability to perform the duties of the post for which you are applying.

Name	Telephone no. (work)
Position held	
Employer	Telephone no. (mobile)
	Telephone no. (home)
Post code	
May we contact this referee at short-list stage?	Yes / No

Name	Telephone no. (work)
Position held	
Employer	Telephone no. (mobile)
	Telephone no. (home)
Post code	
Name	Telephone no. (work)
Position held	
Employer	Telephone no. (mobile)
	Telephone no. (home)
Post code	

References are usually taken up after candidates have been short-listed. If you do not want us to make contact with your current employer at this stage please indicate above. Please note that we reserve the right to contact any previous employer if we feel that this would help in making a decision about the appointment.

Declaration

I declare to the best of my knowledge and belief, that the details I have given on this form (including any separate Medical Questionnaire) and at interview are correct and that any misrepresentation, false, misleading or inaccurate information given by me will be sufficient grounds for revoking any offer of employment, or dismissal without notice if I am employed.

I understand that the Company has the right to check on any experience, achievements, qualifications and skills claimed by me on this form or at interview and agree that such checks may be made by the Company.

I give permission for my referees as stated above to be contacted and understand that any offer will be subject to receipt of satisfactory references by the Company, satisfactory CRB clearance, evidence of qualifications and of identity and work status, satisfactory completion of a probationary period, and (if required) a medical report.

Data Protection Act 1998

I understand that the Company needs to collect and use certain types of information about employees in order to operate its business and to fulfil its legal obligations under the Data Protection Act 1998 and that the information I have provided on this application form will be used during the recruitment process and, if appointed, will be used as part of my personnel records.

I consent to the Company holding such information on file only for as long as it considers necessary to fulfil the purpose for which it was obtained and to process (including disposing and destroying) it in accordance with the eight Data Protection Principles and the other requirements of the Act and any other procedures laid down by the Company for this purpose from time to time.

I understand that the Company will take all reasonable precautions to guard any such information against any unauthorised access or use.

Signed **Date**

You may include a curriculum vitae with this application, if you wish

Bryn Melyn Care operates a policy of providing equality of opportunity in employment, training and career development. To assist us in monitoring the effectiveness of this policy, and for that purpose only, we would be grateful if you would complete this section of the form.

Ethnic Origin

Choose ONE section from A to E, and then tick the appropriate box to indicate your background.

A		B		C		D		E	
White		Mixed		Asian, Asian British		Black, Black British		Chinese, Chinese British	
British - English	<input type="checkbox"/>	White & Black Caribbean	<input type="checkbox"/>	Indian	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
British - Scottish	<input type="checkbox"/>	White & Black African	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	African	<input type="checkbox"/>		
British - Welsh	<input type="checkbox"/>	White & Asian	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>	Black - Other	<input type="checkbox"/>		
British - Other	<input type="checkbox"/>	Mixed - Any Other	<input type="checkbox"/>	Asian - Other	<input type="checkbox"/>				
Irish	<input type="checkbox"/>							Any Other Background	<input type="checkbox"/>
White - Any Other	<input type="checkbox"/>								

Please note that these classifications are those recommended by the Commission for Racial Equality.

Gender

Please tick the appropriate box to indicate if you are male or female.

Male	<input type="checkbox"/>
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Female	<input type="checkbox"/>
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Disability

If you are registered disabled, please indicate and give your Registered Disabled Person's number.

Registered Disabled?	Yes / No	RDP Number:
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Age

Please tick the appropriate box to indicate your current age.

Under 25	<input type="checkbox"/>	25 to 34	<input type="checkbox"/>	35 to 44	<input type="checkbox"/>	45 to 54	<input type="checkbox"/>	Over 54	<input type="checkbox"/>
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<p>When completed, please return this application form to</p> <p>HR Department Bryn Melyn Care Ltd 2 High Street Dawley, Telford TF4 2ET</p>
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