



Thank you for your interest in employment with us.

This form has been designed to tell us all we need to know about you at this stage. Please complete the form in black ink and block capitals.

Due to the fact we are looking after vulnerable elderly people we have to be very careful to ensure we employ suitable people. So we have to check identities, references, criminal records and health records very carefully. Our application form is rather long and detailed as we have to be so careful.

Please complete all sections of the form, sign the declaration at the end and return it to us. We will then contact all short listed candidates to come for interview.

If you have a CV you may wish to send it to us as well as completing the application form. You may send a covering letter as well as completing the application form if you wish.

When you have completed the form please return to

The Manager
The Towans
Berrow Road
Burnham on Sea
Somerset
TA8 2EZ

This page is not part of the application form, but may be used if you need a continuation sheet for job history.

MM/YY	MM/YY	Name Address Post Code	Job Title Duties Reason for Leaving
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Personal Information

Surname:	Forename(s):
Title (Mr, Mrs, Miss, etc):	Previous names (if any):
Address:	Telephone numbers: Mobile: Landline:
E-mail	Next of Kin
Are you free to take up employment in the UK? YES / NO	If you have a Work Permit, What type is it?
Do you have a current full licence?	National Insurance No.
Position applied for	How many Hours do you want to work per week?
Any other work you would continue if you were successful this application	How much notice do you have to give?

Education and Training

From GCSE or equivalent in chronological order

Establishment	Qualifications gained

Work experience

Please give details of your employment, full time education or unemployment for the last ten years. Any relevant posts held before then may also be mentioned if you wish. Please begin with your present or most recent position and then work chronologically backwards.

From	To	Name and address of establishment.	Description of duties and responsibilities and reason for leaving
MM/YY	MM/YY	Name Address Post Code	Job Title Duties Reason for Leaving
MM/YY	MM/YY	Name Address Post Code	Job Title Duties Reason for Leaving
MM/YY	MM/YY	Name Address Post Code	Job Title Duties Reason for Leaving
MM/YY	MM/YY	Name Address Post Code	Job Title Duties Reason for Leaving

Please continue on separate sheet if necessary.

Cautions, Warnings, Reprimands, Rehabilitation and Criminal records

Because of the nature of the work for which you are applying ALL convictions must be disclosed and will be taken into account in deciding whether to make an appointment. (even spent convictions must be declared)

Have you ever been convicted in a court of law and/or cautioned and/or warned and/or reprimanded by a police officer and/or is there any record that will appear on the CRB disclosure in respect of any offence.

Please reply either Yes or No

If Yes please give details.

Signed

A record will not automatically exclude you from employment.

If you are disabled, please give details of any special arrangements you would require to enable you to attend interview.

References

Please give details of two referees, one of whom must be your current or last employer or, if this is an application for your first job, your school teacher or higher or further education lecturer. Neither referee should be a relative or contemporary.

Name		
Position		
Organisation		
Address		
Post Code		
Tel No.		

Because of the nature of the work you have applied for any employment will be dependant on the following:

- **Your written consent to a ISA/CRB check**
- **Your ISA/CRB check being acceptable to the company**
- **Proof of identity**
- **Satisfactory references**
- **A Photograph of you for our records**
- **Evidence of physical or mental suitability for your work**

We will retain information in accordance with the data protection act.

Declaration

I declare that the information I have given on this form is, to the best of my knowledge and belief, true and complete. I understand that if it is subsequently discovered that any statement is false or misleading, or that I have withheld relevant information, my application may be disqualified or, if I have already been appointed, I may be dismissed.

Signed:

Date: