

APPLICATION FORM

Where did you see this?

Post advertised?

PRIVATE & CONFIDENTIAL

Position Applied For:

PERSONAL DETAILS: (Block Letters Please)			
Surname:	First Names:		
Address:	Email:	Mobile No:	
Post Code:	Tel No: (Work)		
Do you hold a full driving licence?	Date of Birth:	National Insurance No:	
Car Available:			

EMPLOYMENT HISTORY: (Most recent job first)

Dates From:	Employed To:	Name/Address of Employer	Job Title: Duties & Responsibilities	Salary

2. EDUCATION & QUALIFICATIONS (Please use extra sheet if necessary)

From:	To:	Name & Address of	Details of Qualifications/Courses
		Establishment	attended
OTLIED IN	FORMATION		
	FORMATION		
Why do yo	u think your pre	evious experience, whether at w	vork or otherwise is relevant to this job?
(Flease us	extra sheet if r	iecessary).	
REASON	FOR LEAVING	LAST EMPLOYMENT	

3. MEDICAL HISTORY

Please give details of any disabi work, hospitalisation etc. Do you registered disabled at a Job Cer	u have a disability you wish		
REFERENCES Give two refere	oos (ano must ha vour cur	ront or	most recent employer)
If you do not wish your referees			
1. Name		Оссира	ation:
Address:			
Daytime telephone no:			
Email:		Occupa	ation:
2. Name:		- 000.рс	
Address:			
Daytime telephone no:			
Email:			
AVAILABILITY			
Available to start work:	Number of hours available:		Are you willing to work weekends?
DECLARATION I declare that to the best of my k	nowledge the information L	have d	iven on this form is true in every
respect.	nomougo, mo mormadon i	nave g	ivon on this form is the in every
Signature:			Date:

Please return completed form to:

Leadwood Care Ltd. 7 Hilary Gardens, Rochester ME1 3PY.

4. Leadwood Care Ltd is committed to an Equal Opportunities policy. In order to ensure the effectiveness of this policy, all applicants are asked to provide the following information, which will be treated in the strictest confidence.

(a) Female	[]	
(b) Male	[]	
(c) Black (African)	[]	
(d) Black (Afro Caribbean)	[]	
(e) Black (Asian)	[]	
(f) White (British/European)	[]	
(g) Cypriot (Greek)	[]	
(h) Cypriot (Turkish)	[]	
(i) Other (please specify)	[]	
	FOR OFF	ICE USE ONLY
Application form sent:		Date:
Application form returned:		Date:
Invited to Interview:		Date:
Request References:		Date:
References received:		Date:
Rejection:		Date:
Offer made:		Date:
Start Date:		Date:
Induction pack:		Date:
Training:		Date:
Uniform/Tabard:		ID photo VI 1 NI 1

I would describe myself as :(please tick appropriate box)

CONFIDENTIAL

DISCLOSURE OF CRIMINAL BACKGROUND OF THOSE WITH ACCESS TO CHILDREN AND VULNERABLE CLIENTS

Due to the nature of your appointment as Care Assistant/Domestic Assistant you should appreciate that <u>Leadwood Care Ltd</u> must enquire into the character and background of all staff. It is therefore essential that in making your application, you disclose whether you have any convictions, bind-over orders or cautions and if so, for what offences.

The fact that a conviction, bind-over order, or caution has been recorded against you will not necessarily exclude you from consideration for this appointment.

Have you any convictions, bind-over orders, cautions	or pending prosecutions? (See notes)
YES NO	Date / /
If yes please give details	
I give my permission for a Police Check to be made	
Signed: Da	te:
Surname:	Post applied for:
Forename:	Sex: M/F
Previous/other names:	Date of Birth: / /
(Including maiden names):	Place of Birth:
(Height:
Current address in full:	
Current address in full.	
	Post Code:
If less than 5 years please give previous address	1 001 0000.
Previous address in full:	
1 TOVIOGO GGGIOGO III TGII.	
	Post Code:
As from (date): / /	1 000 0 000
I declare that the information I have given is correct.	I understand that if I am employed any false
information will result in the termination of my contract	
•	
Signature: I	Date:
Signed:	
•	
Date:	

Date of next review: