***APPLICATION FOR EMPLOYMENT AT***

 ***HOAR CROSS NURSING HOME***

All information will be treated as strictly confidential and no approach will be made to any person without your permission.

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_give consent for you to use the information I have provided in my application.

Position Applied for:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you obtained this position, would you continue in any other employment?

YES OR NO

Do we need to make any disability-related adjustments to allow you to take part in the recruitment process?

**Personal Details**

|  |  |  |
| --- | --- | --- |
| Title: | Forenames: | Surname: |
| Home Address: |  |  |
| Postcode: |  |  |
| Mobile Number: | Home Number: | Other: |
| **Email address:** |  |
| **NI Number:** |  |
| **Qualified PIN if applicable:** |  |
|  |  |  |

**Education & Training**

|  |  |  |
| --- | --- | --- |
| School, college, etc: | Qualifications: | Date: |
|  |  |  |

**FULL Employment History (Continue on separate sheet if necessary)**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Employer: | Start & End Date: | Job Title: | Reason for Leaving: |
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**Previous Relevant Experience**

**Interests**

**Driving Licence**

Have you got a full UK Licence? YES/NO

Any current endorsements? YES/NO if yes, please give details

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List any criminal convictions other than "spent" convictions. If none, state

"none"

The information provided will be confidential and will be considered only in relation to this application.

**1st Employment Reference (must be your current or most recent employer)**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Telephone number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2nd Employment Reference**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Telephone number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please detail any further information you wish to put forward in support of your application:

**Vaccination**

I confirm I have received both doses of the Covid Vaccination and have attached proof from my GP or via the NHS app.

**Declaration**

The above information is true. I understand that any job offer made based on untrue or misleading information may be withdrawn or my employment terminated.

Signature: Date: