

APPLICATION FORM

Where did you see this? Post advertised?

PRIVATE & CONFIDENTIAL

Position Applied For:

Address: Post Code: Tel No: (Work) Do you hold a full driving licence? Car Available: Mobile No: National Institute No:	Suranco
Do you hold a full driving licence? Date of Birth: National Institute No:	Suranco
No:	curanco
Car Available:	Surance
EMPLOYMENT HISTORY: (Most recent job first)	
Dates 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	CODMATION.		
	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 wis <mark>ł</mark>		
REFERENCES Give two references		ur prior	knowledge please tick here []
1. Name		Occup	ation:
Address:			
Daytime telephone no:			
Email:			
2. Name:		Occupation:	
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 knowledge, the information I have given on this form is true in every			
respect.			
Signature:			Date:

Please return completed form to:

Faircross Care Home London Limited, 100 Faircross Avenue, Barking, Essex, IG11 8QZ.

4. Faircross Care Home London Limited 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.

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

FOR OFFICE 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 Y[] N[]

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>Faircross Care Home London Limited</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 Che	ck to be made
Signed:	Date:
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:	
	Post Code:
If less than 5 years please give pre	evious address
Previous address in full:	
	Post Code:
As from (date): / /	
I dealars that the information I have a	given is correct. I understand that if I am employed any false
	on of my contract with Faircross Care Home London Limited.
mornation will result in the termination	of the contract with ancross date frome Estadif Elimited.
Signature:	Date:
Signed:	
Date:	

Date of next review: