

Please complete this Application Form in block capitals in black or blue ink

Position applied for: _____

A: PERSONAL DETAILS

Title (Mr/Mrs/Miss/Ms/other): _____

Surname: _____ Forename(s): _____

Address: _____

Address: _____ Postcode: _____

Home telephone: _____ Mobile telephone: _____

Email Address: _____

Date of Birth: _____ Place of Birth: _____ Nationality: _____

National Insurance No: _____

Do you have the right to work in the UK? YES / NO

Do you hold an eVisa? Yes / No Do you have Settled Status? Yes / No

What is your Share Code? Yes / NO (You will have generated this number online)

B: HEALTH

Are you prepared to undergo a medical examination? YES / NO

(Note that contracts of employment are conditional on completing and passing a medical examination)

C: DRIVING RECORD

Are you a car owner? YES / NO Current Driving Licence: PROVISIONAL / FULL / PSV / NONE

Do you have any Endorsements on your Licence? YES / NO

Details of current endorsements : _____

Have you ever been disqualified from driving, or had insurance refused? YES / NO

If "YES" please provide brief details:

Have you been vaccinated against Coronavirus? YES / NO

If yes, how many doses have you had to date: 1 / 2 Dates: _____

G: EMPLOYMENT HISTORY

Please provide details of all employment, beginning with your present or most recent job first

DATES		Employer	Salary	Position(s) Held	Reason for leaving
from	to				

H: VOLUNTARY & COMMUNITY WORK EXPERIENCE

DATES		Organisation	Position(s) held	Duties
from	to			

I: JOB FLEXIBILITY

Prepared to work: FULL-TIME / PART-TIME

If PART-TIME please indicate preferred hours: _____

Details of any other work which you will continue to undertake if you are offered this Job Position:

Please provide details of any outstanding holidays to be taken:

AVAILABLE TO TAKE UP EMPLOYMENT FROM: _____

J: Please give a detailed account of previous experience and how this is transferable to the post you are applying for:

Are any reasonable adjustments required prior to you attending interview or following appointment?

Yes / No

Details:

Continue on a separate sheet please if necessary

K: REFERENCES

Please provide details of 2 referees who we may approach with regards to this Job Application. These referees must not be members of your family, and one must be your present or most recent employer:

1. Name: _____

Address: _____

Telephone Number: _____

Occupation: _____

2. Name: _____

Address: _____

Telephone Number: _____

Occupation: _____

K: DECLARATION BY APPLICANT

ANY PERSON, UPON SUBSEQUENT EMPLOYMENT, THAT IS FOUND TO HAVE KNOWINGLY SUPPLIED FALSE OR MISLEADING INFORMATION, OR HAS DELIBERATELY WITHHELD RELEVANT INFORMATION, WILL BE SUMMARILY DISMISSED

I have read and understood the information supplied to me in relation to this Job Position, and the information requested in this Job Application Form. I confirm that I am eligible for paid employment in the UK, and that all information supplied by me is true and correct to the best of my beliefs.

I give the prospective employer the right to follow up all references and to make any other job-related enquiries as may be deemed necessary.

Signature: _____ *Date:* _____

ASKHAM CARE HOMES IS AN EQUAL OPPORTUNITIES EMPLOYER

The sole criterion for selection of applicants will be suitability for the Job Position, regardless of gender, background, culture, ethnic denomination, religious affiliation, marital status or disability.

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