APPLICATION FORM

|  |
| --- |
| NAME |
| POSITION YOUR APPLYING FOR |
| LOCATION OF SERVICE |

Guidance notes on completing the application form

Please complete the application form in full. Any incomplete forms with CV’s attached will not be considered.

**Previous employment**

The application form asks you to give details of previous employment. Please also use this section to provide information about any breaks in your employment history lasting more than two weeks.

**Supporting statement**

This section asks you to complete a statement on how you meet the criteria for the role, using the job description as a guide. For this section of the form, please focus on the Why, What, and Person Specification sections of the job description only and demonstrate how you meet the criteria listed in these sections of the job description.

**References**

When providing references please tell us how you know each person, e.g. previous employer, current employer, tutors personal reference etc. Please also tell us how long you have known each referee.

Following safer recruitment best practice, we may take up references if you are shortlisted, prior to the interview.

The Rehabilitation of Offenders Act 1974 (Exceptions Order 1975)

Please complete section A when applying for general posts at Broomhill Care Group Ltd.

Please complete section B when applying for any position at Broomhill Care Group Ltd which involves working with vulnerable adults.

**Personal Details**

National Insurance Number

Title

Surname

First Name

Date of Birth

Address

Post Code

Email Address

Mobile

Driving licence (full UK) Yes No

**Qualifications**

|  |  |  |
| --- | --- | --- |
| Qualifications | Establishment name | Year of qualification |
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|  |  |  |

Please give details of all your qualifications, including professional qualifications. Proof of professional qualifications/status will be required before an appointment is made

Other relevant training courses completed

|  |  |  |
| --- | --- | --- |
| Organising body and title | Brief description of course content | Year |
|  |  |  |
|  |  |  |
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**Details of current or last employment**

Employer’s address

Job title

Date to

Reason for leaving

Salary and other benefits (if any)

Date from

Employer’s name

Briefly describe your current/most recent position, highlighting skills, duties and responsibilities, or experience relevant to the post for which you are applying and how you meet the description of the job applied for.

**Details of all previous employment**

Details of all previous employment (including voluntary, holiday, home-based, part-time work). Please provide full contact details of previous employers in the care or education sectors. Please detail any gaps in employment that are longer than two weeks in this section.

and demonstrate how you meet the criteria listed in these sections.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Dates of employment (month & year) | Length of Service | Employers full name and address | Job title, salary/other benefits and brief description of duties/responsibilities | Reasons for leaving |
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References

Please give the names of three people who may be approached for a reference. These include the following: your present or most recent employer or school, college or university if you have not ben in employment, and a personal referee, who must be a non-family member who has known you for two years or more. Please state in what capacity you know each of the referees you give

Name

Name

Name

Please put an ‘X’ if the reference can be sought before the interview

Please put an ‘X’ if the reference can be sought before the interview

Please put an ‘X’ if the reference can be sought before the interview

How long have they known you?

How long have they known you?

How long have they known you?

In what capacity does this person know you?

In what capacity does this person know you?

In what capacity does this person know you?

Address

Postcode

Address

Postcode

Address

Postcode

Telephone

Telephone

Telephone

Email

Email

Email

Company Name

Company Name

Company Name

Position

Position

Position

**Broomhill Care Group follows safer recruitment best practice. References may be sought if you are shortlisted, prior to an interview, unless you indicate otherwise.**

Are there any dates when you would be unavailable for the interview? Yes No

If so, please provide details.

Please state if you have any relationship with anyone working at Yes No

Broomhill Care Group Ltd. If so, please provide details

**Safeguarding**

Broomhill Care Group is committed to safeguarding and promoting the welfare of adults who use our services and as such, expects all staff and volunteers to share this commitment.

The Rehabilitation of Offenders Act 1974 (Exceptions Order 1975)

Please complete the section below (A or B) which is relevant to the role you are applying for.

A.

Applicants for the general post need to disclose details of unspent convictions. Please tick the appropriate answer below:

Do you have any unspent convictions? Yes No

If yes, please provide details of the unspent conviction (s) in a sealed envelope attached to this application

B.

Applicants for positions in which they may come into contact with vulnerable adults must declare both unspent and spent convictions. Please tick the appropriate answer below:

Have you been convicted of any criminal offences, or Yes No

received a police caution or warning?

If yes, please provide details of the conviction(s) in a sealed envelope, attached to this application.

If you are selected, you will be required to apply for a Disclosure from the Criminal Records Bureau/Disclosure Scotland/Access NI.

Are you subject to any sanctions imposed by a Yes No

Regulatory body?

Eg: GSCC, NISCC, SSSC, CCW, GTC

If yes, please provide details in a sealed envelope, attached to this application.

Are you disqualified from working with children or Yes No

Vulnerable adults?

**Please note:**

**Failure to disclose information where asked for could result in subsequent dismissal or disciplinary action if you were appointed.**

**Having a criminal record will not necessarily be a bar to employment with Broomhill Care Group.**

I confirm that the information given in this application is correct to the best of my knowledge and understand that wrongful completion will invalidate any contract of employment, which may be offered to me by Broomhill Care Group Ltd.

Signature………………………………... Date………………………………..

Monitoring

**Broomhill Care Group is opposed to discrimination on any grounds. We Therefore operate recruitment and selection policies designed to ensure that all job applicants are treated equally regardless of race, religion, ethnic origin, culture, sex, sexuality, marital status, age and disability.**

**BANK DETAILS**

**NAME OF BANK\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NAME OF ACCOUNT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SORT CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ACCOUNT NO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NEXT OF KIN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NEXT OF KIN ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NEXT OF KIN MOBILE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NEXT OF KIN EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**RELATIONSHIP TO NEXT OF KIN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I Confirm that I have received a job description/specification which enabled me to complete the above questionnaire for the part relating to Exposure levels.**

**Names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_**