

Debdale Specialist Care Ltd Thistle Hill Hall Debdale Lane Mansfield Woodhouse Nottinghamshire NG19 7EZ

Employment Application Form

The recruitment process within this organisation has a minimum of two stages. The completion of this application form is stage one. This application will be reviewed and a decision made as to whether to proceed to stage two, the interview, based on this information.

PLEASE COMPLETE ALL SECTIONS OF THE APPLICATION FORM FULLY AND IN BLOCK CAPITALS.

Surname:	First Name/s:
Home Address:	Home telephone number:
	Mobile telephone number:
	Email address:
Post Code:	
How long have you lived at your current address?	Years and Months
Previous addresses	

Note: For Disclosure and Barring Scheme purposes, addresses covering the five years up to the application date must be supplied. If necessary, continue on a separate sheet.

Position Being Applied For:	If you are a qualified nurse please enter your Nursing and Midwifery Council P.I.N:
Qualified Nurse	
	Expiry Date:
Team Leader / Senior Rehabilitation Assistant /	Have you have gained your Care Certificate?
Rehabilitation Assistant / Activity Coordinator (please	Yes / No (please circle your answer)
delete as appropriate)	

Are you eligible to work in the United Kingdom?	Yes / No (please circle your answer)	
Do you have a full clean British Driving License?	Yes / No (please circle your answer)	
Do you have any Driving Licence endorsements?	Yes / No (please circle your answer)	
Driving Licence Endorsement information including	Where did you see this vacancy?	
dates:		

Have you ever been subject to any investigation by	
the Midwifery and Nursing Council? (qualified nursing	Yes / No
staff only)	(please circle your answer)
If you have answered yes to the above question, ple	ease give full details including dates and any penalty
awarded:	

Educational History

Name of School, College etc (please continue if separate sheet if necessary)	Dates Attended	Qualifications Gained	Pass Mark/ Grade

Employment History

Name and Address of Employer	Employment Dates (from and	Position Held	Reason For Leaving
(please continue if separate sheet if necessary)	to)		

Professional Training

Dates Attended	Qualifications Gained	Pass Mark/ Grade
	Dates Attended	

Disciplinary Actions

Have you ever any disciplinary action or procedure against you? Yes If you have answered yes to this question, please give details below:

Yes / No (please circle your answer)

Rehabilitation of Offenders Act 1974

By virtue of the Rehabilitation of Offenders Act 1974 (Exemptions) (Amendments) Order 1986, the provisions of Section 4.2 of the Rehabilitation of Offenders Act 1974 do not apply to any employment which is concerned with the provision of health services and which is of such a kind as to enable the holder to have access to persons in receipt of such services in the course of his / her normal duties.

Do you have or have you ever had a criminal conviction?	Yes / No (please circle your answer)
Have you ever been subject to any conditional discharge, Bind-overs or cautions?	Yes / No (please circle your answer)

If you have answered Yes to either or the above questions, please give further information below:

Please Note:

Employees of the company are subject to the Health and Social Care Act 2008, and will be subject to a Police Record Check through the DBS. Please declare all criminal convictions, whether spent or not, charges, whether proceeded with or not, and warnings and cautions. You will not be eligible for work in a care setting if you are on the DBS Register(s).

Please Tell Us Why Have You Applied For This Position?

References

You must provide references from your two most recent employers. Please provide an additional character referee. All will be contacted, therefore please inform the referees of the fact that you have used their name. If you are unable to provide the required references, please discuss the matter with us.

Current or most recent Employer

Name:	
Address:	
Post code:	
Tel No:	
Job title:	
Email:	

How long have you known this person?...... When did you last see this person?.....

Can we contact this person prior to interview? Yes / No

Previous employer to the one above

Name:	
Address:	
Post code:	
Tel No:	
Job title:	
Email:	

Character reference

Name:	
Address:	
Post code:	
Tel No:	
Relationship to you:	
Email:	

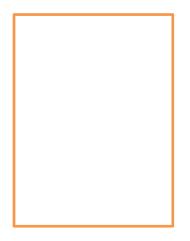
How long have you known this person?......When did you last see this person?

Can we contact this person prior to interview? Yes/No

SIGNATURE and DECLARATION – IMPORTANT – READ BEFORE SIGNING

I declare that to the best of my knowledge and belief the information given by me in this application is true, and I understand that the above information forms the basis of my contract of employment. I understand that if any of the information supplied by me is found to be falsely declared, my contract may have been fundamentally breached and my employment may be terminated immediately. I understand that I cannot be offered a post until a satisfactory response has been received with respect to my DBS Register status, and that should I subsequently be offered a post, that offer will be subject to receipt of two satisfactory references, one of which must be from my previous employer, and that confirmation of the employment will be subject to a satisfactory criminal record check from the DBS. I understand that until a satisfactory response is received from the DBS, and my employment is confirmed, I will be supervised at all times at work, and will not seek or have unsupervised access to vulnerable people. If the post I have applied for is as a Registered Nurse, my confirmation of employment will also be subject to a satisfactory search of the Nursing and Midwifery Council records and registers. By my signature, I authorise the organisation to request a DBS Register check and a criminal records check from the DBS, on initial employment and at any time during my employment thereafter. I undertake to inform my employer immediately if my DBS Register status or criminal status changes at any time during my employment, such as by being charged with an offence (other than motoring offences), the administering of a warning, criminal conviction, referral to any register of barred care workers, or withdrawal of any registration required by my employment status.

Name	
Signature	
Date	



Please attach a passport size photograph here. Please note that the photograph you are attaching must have been taken within the last six months.

If you are enclosing a C.V to support your application, please note that you are still required to complete the application form.

Thank you for applying to work for this company and good luck with you application.

EQUAL OPPORTUNITIES MONITORING SELF CLASSIFICATION FORM

This information is being gathered to monitor the effectiveness of Debdale Specialist Care Ltd.'s Equal Opportunities policy and procedure. The data will be used only for monitoring purposes and will not be taken into account in assessing information on your application form.

Any information given will be strictly confidential and only used for statistical purposes.

Name:					
Post applied for:					
Where did you see the adv	vertisement	for this post?			
Gender: Male / Female					
Age:Dat	e of Birth:_				
Do you consider that you h	nave a disat	pility? Yes / No			
Do you have a disability as defined by the Disability Discrimination Act?Yes / No / Don't KnowHow would you describe your religion?My faith is					
I am not religious		I prefer not to answer			
Ethnic Origin: Please note that ethnic origin questions are not about nationality, citizenship or country of birth. Ethnic origin refers to members of an ethnic group or those who share the same cultural background and identity.					
I would describe my ethn Indian	nic origin as	s (Please ✔ one of the British – English	boxes):	White & Black Caribbean	
Pakistani		British – Scottish		White & Black African	
Bangladeshi		British - Welsh		White & Asian	
Other Asian background		Irish		Other Mixed background	
Caribbean		Other White backgrou	nd 🗖	Chinese	

Thank you for your assistance

Any other background

Other Black background

African