

PLEASE USE BLOCK CAPITALS & BLACK INK



TITLE Mr Mrs Ms Miss Other

POST APPLIED FOR

SURNAME

FORENAMES

TELEPHONE NUMBER

MOBILE NUMBER

EMAIL ADDRESS

ADDRESS (Including Post Code)

MARITAL STATUS

NUMBER & AGE OF DEPENDANTS

NATIONAL INSURANCE No.

NATIONALITY

DATE OF BIRTH

FULL D L

IF 'YES' STATE GROUP

EXPIRY DATE

DO YOU HAVE THE USE OF A CAR AVAILABLE FOR BUSINESS USE PLEASE STATE

 Y N

DRIVING LICENCE NUMBER

EMPLOYMENT HISTORY

CURRENT SALARY £

REQUIRED SALARY £

NAME & ADDRESS (Including Post Code) OF CURRENT EMPLOYER

TELEPHONE NUMBER

POSITION HELD

SALARY / PH RATE

DATE FROM

REASON FOR LEAVING

DATE TO

NAME & ADDRESS (Including Post Code) OF PREVIOUS EMPLOYER

TELEPHONE NUMBER

POSITION HELD

SALARY / PH RATE

DATE FROM

REASON FOR LEAVING

DATE TO

EDUCATION

SCHOOL

DATE FROM

DATE TO

CERTIFICATES OR AWARDS (STATE SUBJECTS)

FURTHER OR HIGHER EDUCATION

COLLEGE / ESTABLISHMENT

DATE FROM

DATE TO

CERTIFICATES OR AWARDS (STATE SUBJECTS)

COLLEGE / ESTABLISHMENT

DATE FROM

DATE TO

CERTIFICATES OR AWARDS (STATE SUBJECTS)

PROFESSIONAL ORGANISATIONS

NAME & ADDRESS (Including Post Code) OF ORGANISATIONS - Include relevant professional and technical qualifications and memberships with relevant bodies

DATE FROM

DATE TO

POSITION / QUALIFICATION HELD

ADDITIONAL SKILLS AND TRAINING

Please give any other skills and training undertaken (I.e. Languages, First Aid, Swimming etc) which may be relevant to this position.

HEALTH

How Many sick days have you taken in the last three years?

Please fill out the Medical Questionnaire enclosed

REFERENCES

PERSONAL

Please provide two personal references who are not related to you and who are able to comment on your competence and ability to work with CHILDREN (or other relevant experience if the post applied for does not involve working with children.

NAME & ADDRESS (Including Post Code)

TELEPHONE NUMBER

NAME & ADDRESS (Including Post Code)

TELEPHONE NUMBER

Continued overleaf.....

REFERENCES Contd.....

EMPLOYMENT

SURNAME

FORENAMES

POSITION HELD

TELEPHONE NUMBER

NAME & ADDRESS (Including Post Code)

Because of the sensitive nature of the duties the post holder will be expected to undertake, you are requested to disclose details of any criminal record. Only relevant convictions and other information will be taken into account so disclosure need not necessarily be a bar to obtaining this position. Please refer to CRB for further information

Have you ever been convicted or bound over by the courts or cautioned, reprimanded or given a final warning by the police? (Note that the post you have applied for is excepted from the rehabilitation of Offenders Act 1974, which means that all convictions, cautions, reprimands and final warnings on your criminal record must be disclosed. If you are in any doubt as to whether a matter should be disclosed, please contact Care2Comment for advise

YES / NO If yes, please record details of offences, penalties and dates on the following page

Are you aware of any police enquiries undertaken following allegations made against you or any enquiries by Social Services or other statutory bodies, which may have bearing on your suitability for this post?

YES / NO If yes, please record details of offences, penalties and dates on the following page

DECLARATION

I hereby declare that the information I have provided in this application is accurate to the best of my knowledge. I understand that to knowingly make a statement which is false or misleading in a material aspect of this application or supporting documentation may result in a refusal of the application or dismissal if discovered after employment has commenced.

Signature of Applicant :

.....

Print Name :

.....

Date :

.....

DECLARATION OF CRIMINAL RECORD OR OTHER ENQUIRIES

If you have answered 'Yes' to either of the questions in the 'DECLARATION OF CRIMINAL RECORD OR OTHER ENQUIRIES'
Please provide details

NAME

DATE

Date	Nature of Criminal Record or Enquiry	Outcome

AUTHORISATION

I, _____ Hereby authorise

Care2Comment of Abbotsland Farm, New Dover Road, Capel le Ferne, Kent CT18 7HY to undertake all necessary checks and verification of any information I have provided in relation to my employment application, which could include the following:

Criminal Records Bureau, Police, Local Authority, Government Agencies, Past Employment and Personal References.

Signed: _____

Address: _____

Date: _____