

APPLICATION FORM 1 — CONFIDENTIAL APPLICATION FOR EMPLOYMENT

AIDARES CARE LTD.

1. Application Form

Position applied for

Available to take up employment

[Enter date]

2. Prepared to Work

Full time Part time Shift work

3. Personal Details

First name

Last name

Address

Telephone numbers

Private

Work

Mobile

E-mail

Do you own a car?

Yes

No

Have a current driving licence?

Yes

No

Provisional

Yes

No

Full

Yes

No

HGV

Yes

No

Have you any current endorsements?

Yes

No

If yes, give details

4.

Will this be your only job?

Yes

No

If no, how long have you been
with the current employer?

5. Secondary Education			
School name/address	Examinations (subject/result, etc)		
6. Further Education and Training			
University/College	Type of course	Subjects	Qualification or class of degree
7. Occupational Qualifications			
College/Institute or other name		Qualification/Level	
8. Membership of Professional Body			
Name		Level	
9. Employment			
Present/last employer	<input type="text"/>		
Current/previous employment	Start date	<input type="text"/>	End date <input type="text"/>
Address	<input type="text"/>		
Job title	<input type="text"/>		
Duties/responsibilities	<input type="text"/>		
Reason for leaving	<input type="text"/>		
Finishing pay	£ pa		

Other most recent employer	<input type="text"/>	
Previous employment	Start date <input type="text"/>	End date <input type="text"/>
Address	<input type="text"/>	
Duties/responsibilities	<input type="text"/>	
Reason for leaving	<input type="text"/>	
Finishing pay	£ pa	

Other most recent employer	<input type="text"/>	
Previous employment	Start date <input type="text"/>	End date <input type="text"/>
Address	<input type="text"/>	
Duties/responsibilities	<input type="text"/>	
Reason for leaving	<input type="text"/>	
Finishing pay	£ pa	

10.

Do you have any convictions, cautions reprimands or final warnings that are not “protected” as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013)? Yes No

The amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are “protected” and are not subject to disclosure to employers, and cannot be taken into account. Guidance and criteria on the filtering of these cautions and convictions can be found on the Disclosure and Barring Service Website.

(Declaration subject to the Rehabilitation of Offenders Act 1974)

If yes, give details

If offered this position will you continue to work in any other capacity? Yes No

If yes, give details

(Applicable to care homes in England after November 2021)

Have you been fully vaccinated against Covid-19?

Yes No

If yes, can you show proof by presenting on request: your NHS Covid Pass/Pass Letter? (If no you must obtain one)

Yes No

If not fully vaccinated, can you provide a medical exemption certificate? (If no you must have one or be fully vaccinated in order to start work)

Yes No

11. Permission to Work in the UK

Are there any restrictions to your residence in the UK that might affect your right to take up employment in the UK?

Yes No

If you are successful in your application would you require permission to work in the UK?

Yes No

12. Community/Volunteer Experience

Name and address of organisation	Position/title	Duties

13. Personal Referees

Work reference — not members of your own family

Name

Address

Organisation

Occupation

Telephone number

E-mail address

Work, personal or educational

Name

Address

Organisation

Occupation	<input type="text"/>
Telephone number	<input type="text"/>
E-mail address	<input type="text"/>

14. Additional Personal Details

Applicants are requested to tick the relevant boxes below to enable the organisation to monitor its equal opportunity policy. Monitoring is recommended by the Codes of Practice for the elimination of racial discrimination and for the elimination of discrimination on the grounds of sex and marital status. This information is used for no other purpose and will be treated as confidential.

White – British	<input type="checkbox"/>	Mixed – White and Black Caribbean	<input type="checkbox"/>	Asian/Asian British – Indian	<input type="checkbox"/>
White – Irish	<input type="checkbox"/>	Mixed – White and Black African	<input type="checkbox"/>	Asian/Asian British – Pakistani	<input type="checkbox"/>
White – Other	<input type="checkbox"/>	Mixed – White and Asian	<input type="checkbox"/>	Asian/Asian British – Bangladeshi	<input type="checkbox"/>
		Mixed – Other	<input type="checkbox"/>	Other Asian Background	<input type="checkbox"/>
Black/Black British – Caribbean			<input type="checkbox"/>	Chinese	<input type="checkbox"/>
Black/Black British – African			<input type="checkbox"/>	Arab	<input type="checkbox"/>
Black/Black British – Other			<input type="checkbox"/>	Other	<input type="checkbox"/>
				Male	<input type="checkbox"/>
				Female	<input type="checkbox"/>

National Insurance number	<input type="text"/>
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15. Recruitment Policy

It is the organisation's policy to employ the best qualified personnel and provide equal opportunity for the advancement of employees including promotion and training and not to discriminate against any person because of race, colour, ethnic origin, national origin, sex, sexual orientation, religion or belief, pregnancy, trans-gender status, marital or civil partnership status, age or disability.

I authorise the organisation to obtain references to support this application once an offer has been made and accepted and release the organisation and referees from any liability caused by giving and receiving information.

Declaration I confirm that the information given on this form is, to the best of my knowledge, true and complete. Any false statement will be sufficient cause for rejection or, if employed, dismissal.

Signature	<input type="text"/>
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Date	<input type="text"/>
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