



APPLICATION FOR EMPLOYMENT

POSITION APPLIED FOR:	HOME:
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Title: Mr / Mrs / Miss / Ms / Other (delete as applicable)		
Surname:	Forename(s):	
Home Address:		
		Postcode:
Home Tel:	Work Tel:	Mobile Tel:

Do you have evidence to work in the UK?	Yes	No
Do you hold a current UK driving licence?	Yes	No
Do you own a vehicle?	Yes	No
Are you insured to drive the vehicle in the course of your employment?	Yes	No
Do you have any endorsements?	Yes	No

EDUCATION

Further Education (if applicable)	Examinations passed

PROFESSIONAL QUALIFICATIONS

Examining Body	Qualifications	Grades

QUALIFIED NURSES ONLY

NMC Pin Number:	Expiry Date:
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CURRENT OR LAST EMPLOYMENT

Employer Name:	Position Held:	
	Start Date:	
Reason for Leaving:	End Date:	
Notice in current job?	Salary:	* per hour / annum

Duties and Responsibilities * delete as applicable

Do you have any holiday arranged?	Yes	No	Dates:
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DETAILS OF PREVIOUS EMPLOYMENT

Employer	Dates		Position Held	Reason for Leaving & Final Salary
	From	To		

TRAINING

Training Courses Attended	Dates	Qualifications obtained (if any)

SUITABILITY TO WORK WITH VULNERABLE ADULTS

Has your name been referred to the Secretary of State under sections 82, 83 and 84 of the Care Standards Act 2000 for inclusion on the list maintained by the Secretary of State of individuals who are unsuitable to work with vulnerable adults (The List) **YES / NO**

If YES, has the Secretary of State:

Confirmed the inclusion of your name on the list?

Removed your name from the list?

Not yet completed their consideration of the referral?

Please note that it is a criminal offence for an individual whose name is included on the list to knowingly:
Apply for, offer to, accept or do any work in a care position.

CONVICTIONS

Please sign declaration below

The National Minimum Standards issued under the Care Standards Act 2000 in respect of Care Homes for Older People require us to obtain information about any criminal conviction you may have. For this purpose you should note that the job you are applying for is included in the list of exceptions under The Rehabilitation of Offenders Act 1974, Exception Amendments Order 1986. This means that spent convictions must also be declared by you.

Please state below **all criminal convictions, cautions or reprimands** that you have, **including spent convictions and any criminal charges that are pending**. You should note that if we decide to offer you a job, the information you supply will be verified by us with the Criminal Records Bureau.

The existence of a criminal conviction will not necessarily lead to the withdrawal of the conditional job offer, but any failure to fully and accurately disclose all criminal convictions will lead to the withdrawal of the offer.

Criminal Convictions and Charges: **YES / NO** *(If YES, please provide details below)*

Signed:

Date:

ADDITIONAL INFORMATION

Please provide details of any other information you consider may help your application including hobbies, interests, ambitions etc.
(Please continue on a separate sheet if necessary)

HEALTH & FITNESS FOR THE JOB

Have you had more than two weeks off work in total due to sickness/injury in the last twelve months? **YES / NO**

If YES, please explain the circumstances:

Colten Care aims to comply with the requirements of the Disability Discriminations Act 1995. If you are invited to attend an interview, please let us know in advance of the interview if you have a disability that requires any special facilities to be made available to you.

We need to be satisfied that you can safely perform the job without risk to you or our residents. If we wish to offer you a job but are in any doubt about your fitness, we may require you to undergo an examination by a doctor appointed by us, or we may require a report by your own GP about your current state of health and your suitability for the job. Your signature in the box below and your submission of this application form constitutes your agreement to:

- Attend and co-operate in any medical examination we require with a doctor appointed by us.
- Instruct your GP to respond to our request for a report about your current state of health and suitability for the job.

I confirm that I have read this section and agree to it's terms.

Signed:

Date:

REFERENCES

The receipt of two satisfactory references is a condition of employment. Please provide details of two referees (who must NOT be friends or relatives), one of whom should be your last or current employer.

Reference 1 - Current/Last Employer		Reference 2	
Full Name: (Mr/Mrs/Ms)		Full Name: (Mr/Mrs/Ms)	
Company Name:		Company Name:	
Address:		Address:	
Postcode:		Postcode:	
Work Tel:		Work Tel:	
Home Tel:		Home Tel:	
Occupation:		Occupation:	

Can we contact your current employer prior to interview? **YES / NO**

Will your referees be willing to provide you with a reference, if we offer you a job 'subject to satisfactory references'? **YES / NO**

ADDITIONAL INFORMATION

Have you previously applied or worked for Colten Care? If Yes, please provide details:

Do you know anyone who currently works for Colten Care? If Yes, please provide details:

Where did you hear about this position?

DECLARATION

I confirm that the information contained on and supplied with this application is true, complete and not misleading. I confirm that I have completed and signed all the sections required. The offer of employment will be subject to the above information being verified.

I confirm I have read and understood this section and accept its terms.

Signed:

Date:

JOB INTERVIEW ASSESSMENT FORM

Instructions: Rate the applicant by placing a tick in the appropriate box immediately after the interview.

EXPERIENCE	SKILL/KNOWLEDGE	COMMUNICATION	WRITTEN WORK
1 Totally inexperienced	1 Has no relevant skills/knowledge	1 Oral comm. of information poor	1 Poor legibility, spelling & grammar
2 Some experience	2 Has some relevant skills/knowledge	2 Adequate	2 Legible, but many errors
3 Proven employment experience	3 Has relevant skills & knowledge	3 Oral communication good	3 Legible, but occasional errors
4 Experience & relevant employment is ideally suited for the job	4 Exceptionally well qualified for this work regarding knowledge/skills	4 Exceptionally good	4 Exceptionally good legibility & good accuracy

OVERALL IMPRESSION (standard of dress, attitude etc.)

1 Unacceptably poor impression	2 Acceptable impression	3 Favourable impression	4 Excellent impression
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Will the applicant fit in with other staff members?

1 No	2 Undecided	3 Yes
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Health & Fitness for the Job

More than 2 weeks off work due to sickness/injury in past 12 months 1

Less than 2 weeks off work due to sickness/injury in the past 12 months 2

Comments (if scored 1):

Any convictions:

1 Yes	2 No
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Comments (if scored 1):

Suitability to be offered employment

1 The applicant is not suited to the work. I would not recommend for employment (give reasons).	2 The applicant might do well in this work, but I cannot recommend without reservations (give reasons).	3 The applicant will do well in this kind of work and I would recommend employment.	4 The applicant should be excellent at this job and I would recommend with confidence.
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Reasons (if any):

JOB INTERVIEW OUTCOME
APPLICANT'S Final Score & Comments

Highest Score Possible 31 Lowest Score Possible 9

FINAL COMMENTS:

FOR OFFICE USE ONLY

Interview letter sent - date	Interview date	Interviewed by	
	Interview time		
Engage/reject	NMC Pin No		
Start date			
Pay	Uniform size		
Hours			
<i>Documents seen & photocopied (please tick)</i>		Documentary evidence of qualifications <input type="checkbox"/>	
Proof of ID, including a recent photo		<input type="checkbox"/> Evidence of right to work in the UK (this may take the form of <input type="checkbox"/>	
Birth Certificate		<input type="checkbox"/> a tax form P45 or P60 showing NI No of candidate)	
Current Passport		<input type="checkbox"/> Driving Licence <input type="checkbox"/>	
EEA/EU Identity Card		<input type="checkbox"/> Home Office letter if applicable <input type="checkbox"/>	
Visa		<input type="checkbox"/> Work Permit/Worker registration scheme document <input type="checkbox"/>	