Application Form



To be completed in typed form where possible and personal statement in your own handwriting in black ink.

Bold bordered sections are mandatory fields.

Refer carefully to the job description and person specification. If the space provided is insufficient please continue on a separate sheet.

Post Applied for:				
Where did you first find this vacancy? (If in publication, please state which	☐ NEDCare Website ☐ Community Care ☐ Guardian ☐ 3 rd Sector Jobs			
one.)	n ☐ Local newspaper ☐ Other (State)			
Have you undergone a DBS check in the past 12 months?	☐ Yes ☐ No		☐ Yes ☐ No	
Personal Details	Title:			
Forename(s) or other names				
Surname				
Address				
			Postcode:	
Telephone	Home:		Work:	
(Underline preferred contact number)	Mobile:			
Email Address				
Car Driver: ☐ Yes ☐ No		Car Owner: ☐ Yes ☐ No		
Do you have any endorsements on your licence? (if so please outline why)		□ Yes □ No		
Are you a UK or EU/EEA national? (If so you will need to provide proof of this at your interview)		☐ Yes ☐ No		
If you are not a UK or EU/EEA national can you provide proof of permission to work in the UK?		□ Yes □ No		
If you cannot provide proof of permission to work in the UK we cannot accept your application as you are unable to work legally in the UK.		Describe the type of	of permission to	work in the UK:
		Hours permitted to	work:	
If you can provide proof of permission to work please state the nature of your permission to work in the UK, any restrictions on the hours you are permitted to work and the expiry date of the permission.		Expiry Date:		
		confirms that you interview stage.	are permitted We may need	documentation which to work in the UK at the I to take a copy of the ks to authenticate it.

Employment History	Present or most recent employment (paid or unpaid) This includes any roles prior to moving to the UK (if applicable)	
Employer Name, Address including Post Code and Telephone Number	Dates employed (From – To)	Position(s) Held
Outline of Duties and Responsibil	ities:	
Reason For Leaving		
Please state reason for leaving and	confirm current employment status:	
	Number o	f Weeks Notice Required:

		onological order, (most re	
Other Previous Employment	temporary, casual and short term jobs. (Please give your <u>full</u> employment history over the past 10 years or since leaving school)		
	NOTE: Gaps in employment are covered on the following page.		
Employer Name, Address including	Date(s)	Position(s) held	Reason for leaving
Post Code and Telephone Number	employed	Position(s) neid	Reason for leaving
Outline of Duties and Responsibilities	3		
Employer Name, Address including	Date(s)	Position(s) held	Reason for leaving
Post Code and Telephone Number	employed	T Comon(c) nota	rtousen for fourting
Outline of Duties and Responsibilities	<u> </u>		
Employer Name, Address including	Date(s)	Position(s) held	Reason for leaving
Post Code and Telephone Number	employed	. ,	5
Outline of Duties and Responsibilities	3		
Employer Name, Address including	Date(s)		
Post Code and Telephone Number	employed	Position(s) held	Reason for leaving
Outline of Duties and Responsibilities	<u> </u>		
Outline of Duties and Nesponsibilities	•		
Employer Name, Address including	Date(s)	Position(s) held	Reason for leaving
Post Code and Telephone Number	employed	(2)	3
Outline of Duties and Responsibilities	<u> </u>		
Outilite of Duties and Nesponsibilities			

Gaps in Employment	Please give details of all periods when not in employment, giving dates and reasons	
Dates from:	To:	Reason:
Dates from:	То:	Reason:
Dates from:	То:	Reason:
Dates from:	То:	Reason:
Have you ever been dismissed from a including redundancy? If so please gi	previous post or had	d an employment contract terminated for any reason
including reduitable ? If so please gi	ve details below.	
Have you been subject to disciplina subject of any disciplinary process no		irrent or any previous posts? (including being the yes, please give details:
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Voluntary Work Experience Give details of any voluntary or unpaid experience	including care of others	
Do you have any restrictions in your working hours or availability?		
Please note our requirements in respect		
of working hours as detailed within the Job Description.		

SUPPORTING STATEMENT PT 1	What experience have you gained in your current and previous jobs and general life experience, which you feel would be relevant to the
	job you are applying for?
	Please refer to the job description and person specification which outline the values, skills, abilities, knowledge and personal qualities required for
	this post and the organisation. Continue on a separate sheet if necessary.

SUPPORTING STATEMENT PT 2	Please tell us briefly why you are applying for this post and why you want to work for NEDCare.
	If in current employment, please explain why you are looking for a new post:
	new post.
· · · · · · · · · · · · · · · · · · ·	Care, once appointed we will ask you some health related questions ment on your working in close personal proximity with older people.
If appointed, are you prepared to ansv	wer health related questions for Risk Assessment purposes?
Yes No	
_	to support rostering and management of the care service. This may t carers can run on their smart phones, to support them in their role.
Please indicate whether you have a sn	mart phone and would be willing to use it to support service delivery.
Yes No	

General Education		Qualifications Achieved
School/College	Date Awarded	Subject/courses studied, level and grade (eg, GCSE, 'A' Level, GNVQ etc)
		(og, occe, re covoi, citt & cit)
Curther and Linker Education		Qualifications Achieved
Further and Higher Education		Subject/courses studied, level and grade (eg, BA History
College/University	Date Awarded	2:1)
Professional Training		Qualifications Achieved
College/University	Date Awarded	Subject/courses studied, level and grade (e.g., BA Social Work/DipSW 2:1)
Professional Membership of Re	gistered Bodies	Registration No/Renewal Date
Name of Professional Body and Level of Membership	Date	Nurses, please give PIN No.
Level of Membership		
NVQs and other work related qu	ıalifications	Qualifications Achieved
College/Training Provider	Date Awarded	Awarding body, level and grade if applicable (eg, Edexcel NVQ 4 Pass)
		Edexcer NVQ 4 Fass)
Other vocational and work relat	ed training undertaken	
List subjects, e.g., First Aid	Duration (e.g., 1 day)	Level (if appropriate)

References	Please supply the names and addresses of two professional referees who have agreed to provide a reference. It is essential that one of your referees must be your current or most recent employer* and that your referee is/was your line manager and not a colleague, relative or friend. Both references cannot be from the same company.		
	References will be verified		
		ove can result in your application being withdrawn. byed, please provide two professional referees and detailed bur self-employment	
Current employer or most recent employer details	Company		
	Name		
	Position		
	Address		
		Post Code:	
	Tel		
	Fax		
	Email		
	Can this reference be conta	tacted prior to interview Yes / No	
Previous employer (if not applicable, an academic referee)	Company		
	Name		
	Position		
	Address		
		Post Code:	
	Tel		
	Fax		
	Email		
	Can this reference be conta	tacted prior to interview Yes / No	
* Unless indicated otherware considering making a		ntacted following your invite to individual interview, if we	
are considering	III OHOL OLOMBIO, III		
Have you ever been convi	ricted of any criminal offence	ee? YES 🗆 NO 🗆	
	itions are subject to an enha further details if an offer of	nanced DBS check. You will be asked to declare all employment is made.	
	ct, you should be aware that t	the personal details submitted with this application form will be for employment records if the application is successful.	
	conceal any material fact, I v	elief, all statements contained in this form are correct and I will, if engaged, be liable to the termination of my contract of	
Signature:		Date:	