



Daneswood, Cuck Hill, Shipham, Nr Winscombe, Somerset, BS25 1RD

HOW DID YOU HEAR OF THIS VACANCY?

LOCAL PRESS: YES / NO If so, please state:	INTRODUCTION: YES / NO If so, please state:	OTHER: YES / NO If so, please state:
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Application for Employment

STRICTLY CONFIDENTIAL - Please type or complete this form in **BLACK INK** – *additional sheets may be used, where necessary*

POSITION APPLIED FOR	Date of Application
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PERSONAL DETAILS

Surname	First names
Address	Maiden name (if applicable)
	Home Telephone No.
	Work Telephone No.
Post code	
National Insurance Number	Mobile No.

EDUCATION

Schools attended	Examinations passed	Year Obtained

College, University, other Further Education	Degrees, Awards or Professional Qualifications	Date



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EMPLOYMENT

Date		Employer's name (most recent first)	Position held	Salary & Benefits	Reason for leaving
From	To				

AVAILABILITY

Period of notice required		Are you legally eligible for employment in the UK?	YES/NO
Date available for work		Do you hold a current driving licence?	YES/NO
Do you require a work permit?	YES/NO	Do you own a car?	YES/NO



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KNOWLEDGE, SKILLS AND EXPERIENCE

Please tell us why you would succeed in this position, setting out relevant knowledge, skills and experience you have gained from current/previous employment or voluntary/community work. You should also provide any other information that may be of interest and relevant to the position. Please also describe your aspirations and ambitions. **Please remember to address the criteria mentioned in the Job Description and/or Person Specification when completing your application.**
(If necessary, you should continue on a separate sheet).

REFERENCES

Please give the name and address of two referees, one of whom should be your present employer. Please note: it may be necessary to contact all previous employers, voluntary organisations etc where you have been employed in working alongside vulnerable adults or children. Daneswood reserve the right to seek your permission to contact such organisations

Name	Status	Address and Telephone No
1.		
2.		

OTHER INFORMATION

If you consider yourself as having a disability, is there any support you would require to attend for interview? Please specify (eg wheelchair, accessible rooms, etc.)	
Are you related to any employee of this organisation?	YES/NO
Have you applied for any other post in this organisation in the last year?	YES/NO



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ADDITIONAL PERSONAL DETAILS

Outside interests, leisure time activities and other personal information which you think may assist us in evaluating your application.

REHABILITATION OF OFFENDERS ACT 1974 – NOTICE TO OFFENDERS

Because of the nature of the work involved, the post for which you are applying is exempt from Section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation Offenders Act (Exemption Order 1975). This means that you are not entitled to withhold information relating to any cautions/convictions you may have had.

Do you have any cautions/convictions to disclose? YES/NO

Any information should be given on a separate sheet and sent with this application form. This information will be treated as confidential and will not necessarily preclude you from employment.

HEALTH SCREENING

The appointment of any post at this home is subject to satisfactory health screening. You will therefore be asked to complete a Declaration of Health and may be asked to undertake a medical examination if successful.

I declare that the information given is correct to the best of my knowledge. I understand that omissions or false statements may disqualify me from employment or lead to dismissal. I give the employer the right to investigate all references.

Signature: Date:

The form when completed must be returned to:

The Manager, Daneswood, Cuck Hill, Shipham, Nr Winscombe, Somerset, BS25 1RD

In an envelope marked Private & Confidential