

Application for Employment

PRIVATE AND CONFIDENTIAL.

Return this form to: The Office Administrator

Position Applied for:			Where did you hear about this vacancy?	
Surname:		F	orename:	
Address:		•		
Postcode:				
			Telephone Number:	
NI number:		E	Email Address:	
Do you have a current driving licence? Yes/No Do you have endorsements? Yes/No. If yes, please provide details		:/No	Do you have your own/access to a vehicle? Yes/No	
Are there any restrictions on you taking up employment in the UK? Yes/No If yes, please provide details				
(Proof of eligibility to work within the UK will be required from the successful candidate) EDUCATION Please do not refer us to your CV. If appointed you will need to provide certificates for any qualification cited below.				
Secondary School:	Dates attended:		ualifications gained (state level and grade achieved):	
		·		
College/University:	Dates attended:	Qualifica	ntions gained (state level and grade achieved):	

Other Training	Training provider:	Give course description & q	ualification g	ained:
Other Employment Plea continue with if you we		 ner employment paid and volu caining this position:	intary, which	you would like to
	lease advise of any	paid or unpaid employment y	ou have parta	ken in over the
last 10 years.	DO NO	OT REFER US TO YOUR CV		
Name and Address of Employer	Dates of employment	Job title and list of main duties (use continuation	Salary / Rate of	Reason for
. ,		sheet if necessary)	Pay	leaving
				leaving
<u> </u>				leaving

Notice required in current post:	
Social & Leisure Interests: List any notable activities	s habbies or interests
Social & Leisure Interests: List any notable activities	s, nobbles of Interests.
Deferences	
References. Provide details of two referens who can provide info	ormation relating to your competency in the role you
are applying for if possible. One of whom should be	
please give an academic referee. If you are applying	
children/vulnerable adults, we reserve the right to a	· · · · · · · · · · · · · · · · · · ·
Name of referee:	Name of referee:
Position:	Position:
Organisation:	Organisation:
Address:	Address:
Postcode:	Postcode:
Tel no:	Tel no:
May we approach prior to interview? Yes/No	May we approach prior to interview? Yes/No
Have you applied for a position at Action for Camily	Carara bafara? If sa plaasa provide detaile below
Have you applied for a position at Action for Family	carers before? It so please provide details below.
Position Applied for Date Applied	Attended Interview Y/N
Tosition Applied for Date Applied	Attended interview 1/14

Supporting Statement
Please state how you meet <u>each of the requirements set out in the Person Specification</u> . This is the most
important part of your application as it will help us determine your suitability for the role. Do not refer
us to your CV.

Criminal Records, Cautions and Rehabilitation

Because of the nature of the work for which you are applying, this post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974, by virtue of the Exceptions Order 1975 as amended by the Exceptions (Amendment) Order 1986, which means that convictions that are spent under the terms of the Rehabilitation of Offenders Act 1974 **must be disclosed**, and will be taken into account in deciding whether to make an appointment. Any information will be completely confidential and will be considered only in relation to this application.

You are also required to submit to a Disclosure and Barring check. Dependant on your position this may be either a standard or an enhanced disclosure, both of which will remain strictly confidential.

Are you barred by the ISA from applying for a regulated activity working with adults or children? Yes/No.

Have you ever been convicted in a Court of Law and/or cautioned in respect of any offence? Yes/No.

If yes, please provide details on the next sheet and return it marked Private and Confidential to: DBS Administration

Action for Family Carers Brickhouse Farm Community Centre Poulton Close, Maldon, Essex CM9 6NG

This will then only be opened and viewed by the authorised member/s of staff.

Declaration. (Please read this carefully before signing the application.)

I confirm that the information stated on this application form is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.

I agree that should I be successful in this application, I will, if required, complete a DBS form to be submitted by Action for Family Carers for a Standard / Enhanced DBS disclosure. I understand that if I fail to do so, or if the disclosure is not to the satisfaction of the company, any offer of employment may be withdrawn or my employment terminated.

Signed:	 Date:	
U		

DBS -Disclosure.

Name:	Position applied for:	
Conviction(s)/Caution(s):	Date received:	
Details:	Date spent:	
I confirm that the information stated on this form is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contact offered.		
Signed:	<u> </u>	
Date:		