

APPLICATION FORM FOR EMPLOYMENT

POST DETAILS

Post Applied for:

PERSONAL DETAILS

First Name(s):

Surname:

Address:

Post Code:

ELIGIBLE TO WORK IN THE UK

Are you eligible to work in the UK? (Yes/No)

If **YES**, please tick which option applies to you from the list below:

- You are a British citizen
- You are a European Economic Area (EEA) citizen
- You are a Swiss national

If you have ticked an option then you are eligible to work in the UK, and therefore don't need to obtain a work permit.

If you do not tick any of the above options, you must provide evidence of your right to work in the UK if invited for interview or assessment.

Do you have a current driving licence: Yes/No

NI Number:

CONTACT DETAILS

Home Tel:

Work Tel:

Mobile:

Email:

CURRENT OR LAST EMPLOYMENT – PLEASE DO NOT LEAVE ANY GAPS IN EMPLOYMENT HISTORY

Name and address of employer	From	To	Position Held	Reason Left

RELEVANT TRAINING AND QUALIFICATIONS FOR POST APPLIED FOR

Name of Training	Date	Qualification

ESSENTIAL CRITERIA

Please use the space below to tell us how you meet the requirements of the job as stated on the person specification. Please ensure that you address each of the essential and desirable requirements as fully as possible. Please address each criterion and attach on a separate piece of paper if required.

ADDITIONAL INFORMATION

Please give any additional details that you feel we should consider in assessing your suitability for the post, including details of any other training qualifications or skills relevant to the post and or personal interests and hobbies you may be involved with that you feel may assist your application.

REFERENCES

Give the names, address and telephone numbers of two referees. One **must** be your current employer, or, if you are currently out of work, then your last employer.

1	Name	2	Name
	Position		Position
	Relationship		Relationship
	Address		Address
	Post Code		Post Code
	Tel No:		Tel No:
	Email:		Email:

REHABILITATION OF OFFENDERS ACT 1974 DISCLOSURE AND BARRING SERVICE (DBS)

For this post you are required to give details of any previous convictions, even if they are normally considered 'spent' under the above Act. Any offer of employment is subject to a criminal record check via the Disclosure and Barring Service and two suitable references.

RELATIONSHIP TO TRUSTEES AND EMPLOYEES OF SHERBURN HOSPITAL

Are you related (either directly or by marriage) to any Trustee or Employee of Sherburn House Charity? (Yes/No).

If you answered **Yes** to the above, please state the names of all persons and your relationship to them:

ACTION FOR EQUALITY

The Charity supports the principal of Equality and Diversity in employment and opposes all forms of unlawful or unfair discrimination on the grounds of age, disability, sex, gender reassignment, sexual orientation, pregnancy and maternity, race, religion or belief and marriage and civil partnerships.

We will continue to take every possible step to ensure that individuals are treated equally and fairly and that decisions on recruitment, selection, training, promotion, and career management are based solely on individual merits and abilities, appropriate to the job.

DECLARATIONS- General Data Protection Regulations (GDRP) – Consent Form for Job Applicants

Agreement to use my data

I hereby freely give my prospective employer, Sherburn House Charity, consent to use and process my personal data relating to my job application.

If I become an employee, I understand a more comprehensive GDPR consent form will be issued.

Name:

Signature:

Date:

DISCLAIMER

I hereby apply for employment and understand that any false information stated herein may result in disqualification of my application, or in dismissal if I am employed by the Charity.

I understand that any personal information stored may be accessed from time to time by authorised inspectors from the Care Quality Commission (CQC) I give permission for these individuals to have access to my records

Signature

Date