**PLATFORM CARE SERVICES JOB APPLICATION FORM**

**The information supplied on this form will be treated in confidence**

**SECTION 1 PERSONAL DETAILS**

Title Mr Mrs Miss Ms

Surname First Names

Gender Male Female

Address

 Postcode

Date of Birth N I Number

Home Telephone Mobile telephone

Email address

Are you eligible to work in the UK Yes No

Do you own a car Yes No

Driving Licence Number

If you are successful you will be asked to provide relevant evidence of the above details

**SECTION 2 PRESENT EMPLOYMENT**

If you are currently unemployed, please give details of your last employer

Name of Employer

Address

 Postcode

Job Title

Date employment commenced

Salary

Brief description of duties

Period of notice

Reason for leaving

**SECTION 3 PREVIOUS EMPLOYMENT**

Most recent employer first

1. Name of Employer

Address

 Postcode

Date of employment From To

Position held

Summary of duties

Reason for leaving

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2. Name of Employer

Address

 Postcode

Date of employment From To

Position held

Summary of duties

Reason for leaving

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3. Name of Employer

Address

 Postcode

Date of employment From To

Position held

Summary of duties

Reason for leaving

================================================================

**SECTION 4 EDUCATION**

**College / University Course Qualifications/Grades**

 **Obtained**

From To Name

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**School Subjects Qualifications/Grades**

 **Obtained**

From To Name

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Please continue on a separate sheet if necessary

**SECTION 5 TRAINING AND DEVELOPMENT**

Please give relevant details of any training or courses that you have attended (e.g. First Aid, NVQ etc)

Date Training Course Level

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**SECTION 6 PERSONAL STATEMENT**

Please use this to provide any general information / details of abilities, skills, knowledge and experience that may be relevant to your application

**SECTION 7 REFERENCES**

Please provide details of three referees who can provide information relating to your competency in a caring role, two of whom must be your present and a recent employer. If you are applying for a post which requires unsupervised access to children or vulnerable adults, the company reserves the right to approach any past employer for a reference

REFERENCE 1

Name

Position / job title

Organisation / Company name

Address

 Postcode

Telephone

Email

Are you willing for this referee to be approached prior to interview? Yes No

REFERENCE 2

Name

Position / job title

Organisation / Company name

Address

 Postcode

Telephone

Email

Are you willing for this referee to be approached prior to interview? Yes No

REFERENCE 3

Name

Position / job title

Organisation / Company name

Address

 Postcode

Telephone

Email

Are you willing for this referee to be approached prior to interview? Yes No

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| **CAUTIONS, REHABILITATION AND CRIMINAL RECORDS** |
| 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.Do you have any convictions that are unspent under the rehabilitation of offenders act 1974?YES / NOIf YES, please give detailsIn addition **you are required** to submit to a Criminal Records Bureau check. Any standard or enhanced disclosure made by the CRB/SCRO will remain strictly confidential.Have you ever been convicted in a Court of Law and/or cautioned in respect of any offence? YES / NO If YES, please give details |
| **SPECIAL REQUIREMENTS (CARE SECTOR)** |
| Because this position involves the care of vulnerable adults, employment is dependent on the following:1. Your written consent to obtaining a standard/enhanced disclosure certificate from the Criminal Records Bureau or an approved umbrella body.
2. Such disclosure being acceptable to the company.
3. Proof of identity and address – e.g. birth/marriage certificate, driving licence, passport, utility bill and proof that you are entitled to work in the uk.
4. Three satisfactory written references.
5. That you will supply a photograph of yourself for retention in your records.
6. Evidence of physical or mental suitability for your work.
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| **DECLARATION (Please read carefully before signing this application)** |
| 1. I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.
2. Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law requires us to inform you of our intention and obtain your permission prior to contacting your doctor. I agree that the organisation reserves the right to require me to undergo a medical examination. In addition, I agree that this information will be retained in my personnel file during employment and for up to six years thereafter and understand that information will be processed in accordance with the Data Protection Act.
3. I agree that should I be successful in this application, I will, if required, apply to the Criminal Records Bureau for an enhanced disclosure. I also agree that the company may apply to my previous employers for references. I understand that should I fail to do so, or should the disclosure or reference not be to the satisfaction of the company, any offer of employment may be withdrawn or my employment terminated.

Signed……………………………………………………………………………….Date…………………………………………………………………………………. |

Please return this for by email to

fiona@platformcareservicesltd.co.uk

OR send by post to 94 Hartsbourne Road, Earley, Reading, RG6 5SJ

For the attention of Fiona Stewart; Unit/HR Manager