



# Application for Employment

Private and Confidential

Please complete in Block Capitals

Position applied for: \_\_\_\_\_

How did you hear of this vacancy? (include date) \_\_\_\_\_

## A. PERSONAL PARTICULARS

Full Name: Mr / Ms / Mrs / Miss	
Address:	Telephone Number (including STD Code)  Home:  Mobile:  Business:  Tick box if you do not want to be contacted at work <input type="checkbox"/>
	Applicants will be required to provide documentary evidence of their right to work in the United Kingdom if invited for interview. Do you have the right to work in the United Kingdom?  Yes <input type="checkbox"/> No <input type="checkbox"/>
e-mail address:	
N.I. Number:	

## B. EDUCATION AND QUALIFICATIONS

QUALIFICATIONS: Please give details of examinations attempted and results (including any examinations failed)

Name(s) and Address(es) of School(s)/College(s)	Dates		Subject/Courses Studied & Level	Examination Result/ Grade (include any examinations failed)
	From	To		

FURTHER AND HIGHER EDUCATION: Please give details of all further and higher education since leaving school including training courses and details of qualifications.

University/College/ Institute Attended	Dates		Subjects Studied Type of Training	Qualifications Obtained
	From	To		

PROFESSIONAL ASSOCIATIONS: Please state whether you are a member of any technical or professional association, and if so, which:

**NURSES** – Please provide your NMC PIN Number: \_\_\_\_\_

FOREIGN LANGUAGES: Please list any foreign languages you speak and your level of competence, both oral and written:

**C. EMPLOYMENT HISTORY**

Please list starting with the most recent, all the organisations for which you have worked during the last 20 years:

Name(s) and Address(es) of Employer(s)	Dates		Position Held/ Main Duties	Starting/ Leaving Salary	Reason for Leaving
	From	To			

Please give details/dates of any career breaks if applicable:

**D. SUPPLEMENTARY INFORMATION**

Please give details of any experience, skill or achievements which you feel may be relevant in your application for employment.  
(Continue on separate sheet if necessary).

Please give dates of any holidays arranged:
Are you currently subject to any contractual "restraints of trade" clauses? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please give further information:
Do you have any commitments which might limit your working hours? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please give details:
Are you willing to work overtime and weekends when required? Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>The Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 and Police Act 1997.</b> The post for which you are applying will be subject to a Criminal Records Bureau Disclosure and the organisation will require you to reveal any criminal convictions, bind-over orders or cautions including those which would normally be regarded as spent. Have you ever been convicted of a criminal offence? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please give details:
Salary Range Expected:
How much notice are you required to give to leave your present employment?
Have you worked for us before? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, give details of reason for leaving:
Please list your interests, sports, hobbies, etc
Does your licence have any current endorsements? Yes <input type="checkbox"/> No <input type="checkbox"/>
Does your licence have any current endorsements? Yes <input type="checkbox"/> No <input type="checkbox"/>

## E. REFERENCES

Please give the names and addresses of two referees who are not related to you, one of whom must be your present employer (or last employer if not currently employed), who we can approach for a confidential assessment of your suitability for this job.

Tick in box if you do not wish your employer to be contacted before an offer of employment is made  |

Name, Position, Business Address and Telephone Number of Present/last employer	Name, Position, Address and Telephone Number
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## DECLARATION OF APPLICANT

I confirm that the above information is correct.

I understand that any false information or deliberate omissions will disqualify me from employment or may render me liable for dismissal.

I consent to the Organisation using and keeping information I have provided on this application or elsewhere as part of the recruitment process and/or personal information supplied by third parties such as referees, relating to my application or future employment. I understand that the information provided will be used to make a decision regarding my suitability for employment and if successful the information will be used to form my personnel record and will be retained for the duration of my employment. If I am not successful, I understand that the Organisation will retain the form for as long as is deemed necessary and that the Organisation may use it to contact me in the event of there being any other vacancies for which I may be suitable.

Signed:

Dated:

## FOR OFFICE USE ONLY

## INTERVIEW RECORD TO BE COMPLETED BY INTERVIEW PANEL

Interviewed by:

Date:

Comments/Areas to Examine:

Decision:      Reject       Further Interview       Accept       (Tick as applicable)

Interviewer's report and reasons for decision:

Rejection letter sent:      Yes  No

## APPOINTMENT RECORD (To be completed where there has been an offer of employment).

### CONDITIONAL OFFER LETTER

Date sent:

Response:

Acceptance/Refusal/No reply

### REQUESTS FOR REFERENCES

Date sent:

Response:

Good/Satisfactory/No Reply/Suspect/Unsuitable

### MEDICAL/MEDICAL REPORT

Date sent:

Response:

Good/Satisfactory/Suspect/Unsuitable

RIGHT TO WORK IN U.K. Yes  No

Appropriate documentary evidence checked.

Starting Date:

Starting Salary:

Grade:

Job Title:

Personnel/Clock Number: