**APPLICATION FORM**

**Please complete this from in black ink or type**

|  |  |
| --- | --- |
| **Position Applied for:** | **Date of Application:** |
|  |  |

**PERSONAL DETAILS (Please complete this section in block capitals)**

|  |  |  |
| --- | --- | --- |
| Mr, Mrs, Miss, Ms, Other | Surname: | First Names: |
|  |  |  |
| Address: | | Telephone Numbers: |
| Day: |
| Evening: |
| Mobil: |
| Email: |
| Membership of professional bodies (including NMC PIN) | | |
|  | | |
| **DRIVING (Please only complete where travel is required for the job role)** | | |
| Do you have a current driving licence? **Yes**  **No** | | |
| Do you have access to a car for work? **Yes**  **No** | | |
| Please provide details of any endorsement(s): | | |
| **RIGHT TO WORK IN UK** | | |
| National Insurance Number: | | |
| Do you require a permit to work in UK?  **Yes**  **No**    **DECLARATION OF CRIMINAL OFFENCES:**  The information you provide will be treated as strictly confidential  This position is exempt from rehabilitation of Offenders Act 1974. Successful candidates will be asked to complete an Enhanced DBS check prior to their appointment as this position involves regular contact with vulnerable adults. It is important that you include details of any criminal convictions that you may have, including cautions and convictions that might otherwise be deemed as spent. Failure to disclose a criminal conviction that is later disclosed on your DBS Disclosure is likely to result in any offer of employment being withdrawn. Having a criminal conviction or caution will not necessarily bar you from working with us as long as you discuss it with us during the application process. | | |
| Have you had any criminal conviction? **Yes**  **No** | | |
| If yes, please state the nature and date of any conviction(s):  …………………………………………………………………………………………………………………………………………….  ……………………………………………………………………………………………………………………………………………. | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **EMPLOYMENT HISTORY**  In order to safeguard the vulnerable people in our care, it is important that all candidates are able to provide their full employment history and to explain any gaps in employment. Please continue on a separate sheet and attach a copy of your CV. | | | | | | | | |
| **NAME AND ADDRESS OF EMPLOYER** | | | | **JOB TITLE** | | | **MONTH/YEAR FROM** | **MONTH/YEAR TO** |
|  | | | |  | | |  |  |
| **REASON FOR GAP**  Please use this space to detail any gaps in employment, e.g. due to travel, job seeking etc. | | | | | | | **START GAP** | **END OF GAP** |
|  | | | | | | |  |  |
|  | | | | | | | | |
| **EDUCATION & TRAINING** | | | | | | | | |
| **From (Month/year)** | **To (Month/year)** | | **Name and address of School, College etc.** | | | **Courses, qualifications, results** | | |
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| **REFERENCES**  It is the LifeFont’s policy to obtain a minimum of two referees, prior to confirming an offer. **The first reference must be your current/most recent employer.** The second referee should be work related or an academic referee, person that has known you for at least 5 years and must not be a member of the family.  We will not attempt to obtain any references until a conditional offer of employment is made. | | | | | | | | |
| Name: **(1)** | |  | | | Name: **(2)** | |  | |
| Position: | |  | | | Position: | |  | |
| Address: | |  | | | Address: | |  | |
| Tel. No: | |  | | | Tel. No: | |  | |
| Email: | |  | | | Email: | |  | |

**DECLARATION:**

I confirm that information given on this form is correct and accurate. I understand that any false statement may cause LifeFont Agency to cease continuation of my application/ registration or, following recruitment, may subsequently lead to the termination of contract agreement and removal from company register.

|  |  |  |  |
| --- | --- | --- | --- |
| Signed: |  | Date: |  |

*Other information*

*All applicants who cannot provide a registered DBS or full immunisation record will be required to complete at their own cost. LifeFont Solutions will cover the cost of any Mandatory Training updates however cancellations outside of 48 hours and late attendances will be charged to the candidate.*  
*Candidates will be required to purchase uniform if required at the cost of £20 this will be deducted from your timesheet once you have started working through us. Please fill in the box below stating your uniform size and quantity.*

**Your Registration Checklist and Documents that will be required**

To complete your registration, you will be required to provide the following documentation

|  |  |
| --- | --- |
|  | Completed Registration Form – signed in all requested areas |
|  | Completed Health Questionnaire – signed |
|  | CV – E-mailed in word format – Your CV must cover full work history from education |
|  | Your Right to Work in the UK as well as your passport and forms of I.D -We require to see the originals of these documents. (Posted originals will be returned the same day received by recorded delivery). |
|  | Birth Certificate/Driving License if required |
|  | HPC or NMC Entry Certificate and up to date renewal card |
|  | Copy of your most recent DBS – less than 1-year-old |
|  | Training Qualifications – Diploma/Degree/NVQ – Any other training Certificates |
|  | 2 X proof of Address |
|  | A completed and signed medical Questionairre/Assesment. |
|  | Mandatory Training Certificates > 1 Year |