

HIGHFIELD PRIVATE RESHOME

APPLICATION FOR EMPLOYMENT	
CONFIDENTIAL	
Position applied for:	Return this form to: Manager/Deputy Manager
Please type or complete this application form in BLACK ink	

PERSONAL			
Surname		First Name	
National Insurance Number		Address	
Email Address		Post Code	
Evening Tel No		Tel No	
Are you legally eligible for employment in the UK? YES / NO		Do you require a Work Permit to work in the UK? YES / NO	
Do you hold a current driving licence? YES / NO If YES, please give details, including any endorsements (eg; car, HGV, PSV etc.)			
CURRENT EMPLOYMENT			
From - To	Name of Employer	Address of Employer	Job Title & Duties
Final Salary	Reason for Leaving		
Notice Period Required	Date Available for		
PREVIOUS EMPLOYMENT			
This must cover a full work history, from school to present day, so please state reasons for any gaps			
From - To	Name and Address of Employer	Job Title	Final Salary & reason for leaving
continue on a separate sheet if necessary			
EDUCATION			
School, College, University, Other Further Education		Examinations Passed, including NVQ's	
For Nursing Posts Only:			
Qualification Achieved		PIN No	
Date Achieved			
Place Studied			

REFERENCES
Please note here the names, addresses and telephone numbers of two individuals from whom we may obtain references. One referee should be your present employer. References from your present employer will not be sought without your authority.
1. _____
2. _____

MEDICAL DECLARATION
By signing this application form, I am certifying that I am physically and mentally fit to undertake the role I am applying for and have no underlying health or disability conditions.
Please declare any conditions that you have that may affect the position applied for :

OTHER INFORMATION
If you consider yourself as having a disability is there any support you would require? YES / NO If Yes, please specify (eg, wheelchair access, accessible rooms etc)
Are you related to any employee of Select Healthcare Group? YES / NO If Yes, please specify who

DATA PROTECTION
The information detailed in this application form may be used by the Select Healthcare Group in monitoring and progress of its employment policies and practices, and in particular our Equal Opportunities Policy. This monitoring is for statistical purposes only and you will not be identifiable from this process. However, your personal details contained in the application form may be used in the prevention and detection of fraud. Where this occurs you will be identifiable.
I consent to the Select Healthcare Group recording and processing the information detailed in this application form. I understand that this information may be used by the Company in pursuance of its business purposes and my consent is conditional to the Select Healthcare Group complying with their obligations under the Data Protection Act 1998.
Yes <input type="checkbox"/> No <input type="checkbox"/>

CRIMINAL CONVICTIONS
Because of the nature of the work in the Select Healthcare Group, this post is exempt from the provisions of Section 4 (2) of the Rehabilitation of Offenders Act 1974, by virtue of the Rehabilitation of Offenders Act (Exemptions) Order 1975. Therefore all applicants must tell us about sentences or convictions that for other purposes would be considered to be "spent" under the provisions of the Act. In the event of employment, any failure to disclose such sentences or convictions could result in dismissal or other disciplinary action. Having a criminal record will not necessarily be a bar to obtaining a position.
In addition, staff that are in jobs where they have access to vulnerable adults are required to undergo a Criminal Records Bureau and a POVA check into their backgrounds, in accordance with the ROA (Exemptions) (Amendment) Order 1986, prior to starting a position with the Company. This will be an enhanced disclosure. A copy of the CRB's Code of Practice is available from HR and each Home Manager on request.
It is a criminal offence if you knowingly apply for any position working with vulnerable adults if you have been either confirmed or provisionally listed on any POVA list.
Select Healthcare Group reserve the right to recoup the cost of the CRB and/or POVA check should you decline any post once offered. You expressly agree to this by signing this application form.

Do you have any criminal records to declare? This includes : convictions, cautions, reprimands and warnings	YES / NO
Are there any current criminal proceedings against you?	YES / NO
If you have answered Yes to either of these two questions, please give details on a separate sheet.	
ADDITIONAL INFORMATION	
Please tell us why you would succeed in this position, setting out relevant knowledge, skills and experience you have gained. You should also provide any other information that may be of interest and relevant to the position. Include Training/Membership of Professional Bodies/Apprenticeships/Special Courses etc.	
Please continue on a separate sheet if necessary	
DECLARATION (please read this carefully before signing this application)	
I confirm that the above information is complete and correct and that any untrue or misleading information will give the employer the right to reject my application, to withdraw any employment contract offered or, if employed, to dismiss without notice.	
Signed	