



Application Form

CHURCH VIEW CARE HOME
Platinum Care Homes Ltd are an Equal Opportunities Employer

All information will be treated as strictly confidential.
Please write clearly in BLOCK CAPITALS.

Position applied for.....
Surname..... Maiden Name.....
First Name(s).....
Known as..... Mr/ Mrs/ Ms/ Miss

Address.....
.....
.....

Post code.....
Telephone No. Home..... Work.....
Mobile..... Email.....

EDUCATION

Secondary school attended.....
Details of examinations taken with dates & grades.....
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Details of any other relevant qualifications (professional or otherwise) where & when obtained .
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.....

Qualified Nurses only:

Name of training school/university.....
Address.....
.....
.....Postcode.....
Attended from.....to.....
Professional PIN Number.....Expiry Date.....

Do you hold a clean driving licence? Yes/No.....
Do you have use of a car during working hours? Yes/No.....

DETAILS OF UNION MEMBERSHIP

.....

LEISURE INTERESTS & HOBBIES

Please give details.....
.....
.....

EMPLOYMENT RECORD

(Please state your full employment history and do not leave any gaps.)

Are you currently employed? Yes/No

Name & address of your most recent employer
.....
.....
.....Postcode.....

Telephone No.....Position held.....

How long have/did you work with this employer?

Salary earned per week £..... or per month £.....

Salary Expected per week £..... or per month £.....

Reason for leaving

Details of previous employment

Name & address.....
.....
.....
.....
From To.....
Position held.....
Reason for leaving.....

Name & address.....
.....
.....
.....
From To.....
Position held.....
Reason for leaving.....

Name & address.....
.....
.....
.....
From To.....
Position held.....
Reason for leaving.....

Continue on separate sheet if necessary.

Notice Period.....

Details of Holiday commitments in the next twelve months.....
.....

Do you have any personal connections with any employees or clients?.....
.....

REFERENCES

All Staff must have 2 written references before they commence employment

Please give details of two referees one of which must be your current or last employer

Full name
How you know the person.....
Address.....
.....Postcode.....
Telephone number: Home.....Work.....
Fax number.....
Email.....

Full name
How you know the person.....
Address.....
.....Postcode.....
Telephone number: Home.....Work.....
Fax number.....
Email.....

Convictions:

Rehabilitation of Offenders Act 1974 Please state any convictions/offences/ reprimands, whether spent or unspent. This is information of which you are not entitled to withhold under the Rehabilitation of Offenders Act 1974. (Exceptions) Order 1975 in view of the nature of the work for which you are applying. Failure to disclose convictions may lead to dismissal. Any disclosure will be treated confidentially and will be considered in relation to this application only.

Convictions.....
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Any formal job offers are subject to a CRB check.
All new employees have to pay for their own CRB check when offered employment which is paid directly to CRB and not to our company.

Declaration

I confirm that the information given on this form is true and accurate. I understand that employment will be considered subject to the above particulars being correct.

Signed.....Print name.....

Date.....