

Springdale, High Street, Wanstrow Shepton Mallet, Somerset BA4 4TE

Phone: O17 4985 0894 | www.selwoodcare.co.uk | support@selwoodcare.co.uk

JOB APPLICAT	ION FORM							
Vacancy title:								
_	how you hear	d about this va	cancy:					
ricase ten us	Please tell us how you heard about this vacancy:							
1. Personal de	tails							
Last name:				First na	me:			
Address:								
Postcode:								
Home Telepho	one No.		Day	time Contact I	No.			
•	l						_	
E-mail address	s:							
	l							
National Insur	ance No.							
rtational misa.	ance ito:							
Driving Licence Do you hold a full clean driving licence valid in the LIK2 Yes No								
Do you hold a full, clean driving licence valid in the UK?								
2. Preferred h	nurs							
Please tick								
r rease trek					1			
Full-time			Part-time					
We like our employees to be able to work flexibly across the week and need to know when other commitments mean								
you could not be available to work:								
Please tick when you are <u>unavailable</u> :								
	Mon	Tues	Weds	Thurs	Fri	Sat	Sun	
Morning	141011	Tucs	44 CU3	111013	111	Jac	Juli	
Afternoon								
Evening								

3. Education/Qualifications

Study dates	Qualification and Grade	Date obtained
Study dates	Qualification	Date obtained
Study dates	and Grade	Date obtained
Study dates	Qualification and Grade	Date obtained
	Study dates	Study dates Qualification and Grade Study dates Qualification Qualification

Training and Development

Please use the space below to give details of any training or non-qualification based development which is relevant to the post and supports your application.

Training Course	Date	Course Details (including length of course/nature of training)

Current Membership of any Professional Body/Organisation
Please give details:

4. Employment history

Previous employment: Plea	ase include any previous ex	xperience (paid or unpaid)), starting with the most recent first.
Current or most recent emp	<u>ployer</u>		
Name of employer:			
Address:			
		Postco	de:
Position held:			
Date started:		Leaving date:	
Reason for leaving:			
Salary on leaving this post:		act name of line manager ence:	for
Brief description of duties:			
Previous employer			
Name of employer:			
Address:			
Address:			
		Postco	de:
Position held:			
i osidon nelu.			
Date started:		Leaving date:	
Reason for leaving:			

4. Employment history (continued)							
Salary on leaving this post:	Contact name of line manager for reference						
Brief description of duties:							
Previous employer							
Name of employer:							
Address							
Address:							
	Postcode:						
Position held:							
rosition neid.							
Date started:	Leaving date:						
Reason for leaving							
Salary on leaving this post:	Contact name of line manager for reference						
Brief description of duties:							

Continue on separate sheet if necessary

5. Statement in support of your application

6. Convictions/ Disqualifications

A criminal record will not necessarily be a bar to obtaining a position at Selwood Care Ltd. Selwood Care Ltd will carry out a Criminal Records Bureau check before a formal offer of a job is made. This will be discussed at your interview. If a check is returned and reveals any relevant information, this will be discussed with the applicant.

Please provide details below if you have been convicted of a criminal offence or been the subject of a conditional discharge or probation order. (Past criminal proceedings are not necessarily an obstacle to taking up a post. This occurs only where the offence/s is/are deemed relevant. Any details will be discussed with you should you be the successful candidate based on your supporting statement, interview and tests).				
7. Permit to work/Reasonable adjustments/Arrangements for interview	<u>.</u>			
Do you require work permit to work in the UK? Are you subject to any conditions relating to your employment in this country?	YES / NO YES / NO	(delete inapplicable (delete inapplicable		
If "yes" to either of the above, please use the space below to tell us what these	are?			
If you need us to make any adaptations for your interview to accommodate any these should be?	disability you ma	y have please tell us what		
If appointed when could you start? Give period of notice if applicable		1		

8. Reference	ces							
Please give	the det	ail of two references – see guidance sheet for fu	ırther information.					
Name of finand relation you:								
A.1.1								
Address:								
	Postcode:							
	Email:							
	Tel:							
Name of se referee and relationshi	d	:						
Address:								
	Postcode:							
	Email:							
	Tel:							
9. Declarat	ion							
Statement	to be si	gned by the applicant						
		e following declaration and sign it in the approned, your application will not be considered.	ppriate place below. If t	his declaration is not				
_		od Care Ltd can create and maintain computer and stored in accordance with the Data Protection		• •				
I agree tha	t Selwo	od Care Ltd may request a Criminal Records Bui	reau check before a for	mal offer is made.				
I confirm that all the information given by me on this form is correct and accurate and I understand that if any of the information I have provided is later found to be false or misleading, any offer of employment may be withdrawn or employment terminated.								
Signed:	ſ		Date:					
Jigilicu.			Date.					

Guidance sheet

Please read through the following guidelines that will help you complete the application form.

- Complete all sections of the form.
- Make sure the form is tidy and try to avoid mistakes by writing out a version first to make sure you are happy with the information you are providing. Always read through your final version before you send it.

To complete your application:

- Please type or write clearly in black or blue ink.
- Ensure you clearly state the job title you are applying for.
- In the 'Employment history' section you must state why you have left a position.
- Always explain any gaps in work history.
- Proof of qualifications and membership to professional bodies may be required.

References

We will take up professional references once you have been interviewed and **provisionally** offered the post. Please make sure that you have given the full contact details of your referees so that this does not delay processing reference requests.

If you have no employer references, we will take up references with named individuals at colleges where you have studied, or people who know you in a professional capacity. Please do not put down family members or people you live with as referees.

You will only be confirmed in the post once we are satisfied with the information received from your referees.

Supporting Statement

The 'Why you feel you are suitable for this position' part of the form is called your *supporting statement*. It is the most important part of the application form.

You should consider the following:

- Applications can only be assessed on the information you provide. You need to clearly demonstrate your capabilities.
- You need to explain how you meet each of the <u>person specification</u> points and provide examples from your previous experience. Do not forget to present this in relation to the job description.
- Often the strongest applications are those that link the three elements highlighted above and are presented in a clear format (e.g. numbered points that correspond to person specification).
- We expect your supporting statement to be a minimum of ¾ of a side of A4 and a maximum of 2 sides.
- Honesty is always the best policy; please do not make false claims.
- If you are making a career change, stress what skills are transferable to the role you are applying for.
- Ensure you return your application in good time before the closing date aim for the day before the deadline.
- Use concise, unambiguous sentences and avoid exaggerations.

Finally good luck with your application and thank you for your interest in Selwood Care Ltd.