

Present / Last Employment

| | | |
|---|-----------|---|
| Name and Address (Including Postcode) of Present / Last Employer: _____ _____ _____ _____ _____ Telephone Number: _____ | | Summary of Main Duties and Responsibilities: _____ _____ _____ _____ _____ |
| Position Held: | | Reason For Leaving: |
| Start Date: | End Date: | Required Notice Period: |

Previous Employment History

Please ensure a full employment history is given, including details of any unemployment. Please continue on a separate sheet if necessary.

| From | To | Name and Address of Employer | Job Title and Responsibilities | Reason for Leaving |
|------|----|------------------------------|--------------------------------|--------------------|
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References

Employment at Professional Carers is subject to two written references. If you have a current or previous employer, you must provide the details of your two most recent employers. If you are unable to provide employment referees details, please give the details of professional referees, a professional referee must be a professional member of the community e.g. Doctor / Police Officer etc. We reserve the right to contact any of your previous employers for a reference unless you state otherwise.

| Referee Detail One | |
|--------------------|--|
| Name: | Address (Including Postcode): _____ _____ _____ _____ _____ |
| Organisation: | |
| Position Held: | |
| Telephone Number: | |
| Fax Number: | |
| Email Address: | In what capacity do you know this person? |
| Referee Detail Two | |
| Name: | Address (Including Postcode): _____ _____ _____ _____ _____ |
| Organisation: | |
| Position Held: | |
| Telephone Number: | |
| Fax Number: | |
| Email Address: | In what capacity do you know this person: |

Disability

Professional Carers is committed as an employer towards the recruitment and employment of applicants with a disability. The below questions are asked in accordance with the Equality Act 2012 and any subsequent updates. (Please tick boxes as appropriate)

- Do you consider yourself to have a disability? YES NO
- Would the provision of any aids or adaptations assist you in carrying out the duties of this post? YES NO
- If YES, please state:

- Is there anything we need to know about your disability in order that you can have a fair interview, for example a hearing loop. Please state:

Right to Work

In accordance with the Immigration and Asylum Act we require all new employees to produce documented evidence of their right to work in the UK. (Please tick boxes as appropriate)

- Are you a UK resident? YES NO
- If NO, do you hold a work permit? YES NO
- Expiry Date of work permit: _____

Availability

For your application to be considered this role will require you to be flexible, some early mornings, evenings and weekends are a requirement of the role. If you have no restrictions on your availability to work – please indicate ‘available for all’. Your rostered hours will be discussed during the interview process.

| | | | | |
|--|--|---|---|---|
| Full Time <input type="checkbox"/> Preferred Amount of Hours PW: _____ | Part Time <input type="checkbox"/> Preferred Amount of Hours PW: _____ | Bank <input type="checkbox"/> Preferred Amount of Hours PW: _____ | | |
| Monday <input type="checkbox"/> | 7.00am – 4.00pm <input type="checkbox"/> | 4.00pm – 11.00pm <input type="checkbox"/> | <small>NIGHTS</small> 10.00pm – 7.00am <input type="checkbox"/> | Available For All <input type="checkbox"/> |
| Tuesday <input type="checkbox"/> | 7.00am – 4.00pm <input type="checkbox"/> | 4.00pm – 11.00pm <input type="checkbox"/> | <small>NIGHTS</small> 10.00pm – 7.00am <input type="checkbox"/> | Available For All <input type="checkbox"/> |
| Wednesday <input type="checkbox"/> | 7.00am – 4.00pm <input type="checkbox"/> | 4.00pm – 11.00pm <input type="checkbox"/> | <small>NIGHTS</small> 10.00pm – 7.00am <input type="checkbox"/> | Available For All <input type="checkbox"/> |
| Thursday <input type="checkbox"/> | 7.00am – 4.00pm <input type="checkbox"/> | 4.00pm – 11.00pm <input type="checkbox"/> | <small>NIGHTS</small> 10.00pm – 7.00am <input type="checkbox"/> | Available For All <input type="checkbox"/> |
| Friday <input type="checkbox"/> | 7.00am – 4.00pm <input type="checkbox"/> | 4.00pm – 11.00pm <input type="checkbox"/> | <small>NIGHTS</small> 10.00pm – 7.00am <input type="checkbox"/> | Available For All <input type="checkbox"/> |
| Please tick which day you would prefer to work at the weekend | | | | |
| | Saturday <input type="checkbox"/> | 7.00am – 11.00pm <input type="checkbox"/> | <small>NIGHTS</small> 10.00pm – 7.00am <input type="checkbox"/> | Available For All <input type="checkbox"/> |
| | Sunday <input type="checkbox"/> | 7.00am – 11.00pm <input type="checkbox"/> | <small>NIGHTS</small> 10.00pm – 7.00am <input type="checkbox"/> | Available For All <input type="checkbox"/> |

Transport Details

- Do you have a full valid UK driving licence? YES NO
- Do you have access to your own private vehicle for work purposes? YES NO
- If NO, what other means of transport do you intend to use? _____

Additional Information

- Are you a relative or close associate of a Professional Carers employee? YES NO
- If YES, please provide name and relationship: _____
- Details of any other work, which you will continue to undertake if you are offered this position: _____

- Please provide dates of any holidays that you are due to take: _____

Convictions

Due to the nature of our work, this post is exempt from the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 and is subject to a DBS Check via the Disclosure and Barring Service (DBS). You are therefore required to give details of all convictions and cautions, including 'spent' convictions. A conviction will not necessarily be a bar to obtaining employment, when considering an applicant with a criminal record, Professional Carers will consider the relevance of the conviction(s) to the job for which the person is applying. Any information that you may give will be strictly confidential. (Please tick boxes as appropriate)

- Do you have any convictions, including 'spent convictions'? YES NO

If YES please give details and dates:

- Do you have any cautions, reprimands or final warnings? YES NO

If YES please give details and dates:

- Are there any criminal proceedings pending against you? YES NO

If YES please give details and dates:

Experience, Skills and Abilities – Supporting Statement

The supporting statement is a very important part of the application; please use the space below to explain how you meet the specific requirements of the job description. Remember to include skills, experiences and interests outside of paid work such as voluntary / community work, things you enjoy doing and any previous life experiences that you feel may be relevant to the post that you are applying for. Please continue on a separate sheet if necessary.

I give my consent for Professional Carers to hold and process the data contained in this monitoring and application form, strict confidentiality will be observed and disclosures will only be made for personnel administration and payroll purposes.

Please tick the box to confirm you have read and agree to the above statement:

Declaration

I declare that the information on this application form is accurate and true. I accept that any false statement or material omissions may affect my application and / or employment which may result in disciplinary action against me, including dismissal.

Print Name: _____ Signature: _____ Date: _____

Further Notes – Office Use Only

Contact Details

If you have difficulty in completing application forms due to disability please contact us and we will make arrangements for an alternative format.

For further information or advice please see below for contact details.

Please return the completed application form to the relevant branch you are applying for:-

Professional Carers Wirral
223 / 225 Seaview Road
Wallasey
Wirral
CH45 4PD

Professional Carers Scotland
6 Elizabeth House
Unit 31 Royal Elizabeth Yard
Kirkliston, West Lothian,
EH29 9EN

Tel: 0151 638 4500

Fax: 0151 638 9407

E-Mail: info@professional-carers.co.uk

Tel: 0131 319 1968

Fax: 0151 638 9407

E-Mail: info@professional-carers.co.uk

Please note if you have not heard from us within six weeks of completing this application form, you can assume you have been unsuccessful.

Professional Carers is committed to providing equality of opportunity in its employment procedures and will consider all applicants based on their suitability for the post, irrespective of gender, age, race, religion, ethnic origins, disability, sexuality or responsibility for dependants. Please complete this section of the form, which is entirely voluntary and will only be used to monitor the effectiveness of our Equality and Diversity Policy. Please note that this form is not used as part of the recruitment and selection process.

1. **I define my gender as:-**

Male

Female

Prefer not to say

2. **What is your ethnic background:-**

White

British

European

Other White background (please specify):-

Black or Black British

Black British

Black Caribbean

Black African

Other Black background (please specify):-

Mixed

Mixed Caribbean

Mixed Black African

Mixed Asian

Other Mixed background (please specify):-

Asian

Indian

Pakistani

Bangladeshi

Other Asian background (please specify):-

Chinese or other Ethnic Group:-

Chinese

Other Ethnic Group (please specify):-

3. **Do you have a Disability?**

Yes

No

Prefer not to say

4. **What is your Religion or Belief?**

Christian Buddhist

Hindu Muslim

Jewish Sikh

None Prefer not to say

Other Religion / Belief (please specify):-

5. **What is your Sexual / Gender Identity?**

Lesbian or Gay Bi-Sexual

Heterosexual Transgender

Prefer not to say

6. **What is your age range?**

Under 25

25 – 41

Over 41

7. **Marital Status:-**

Married

Divorced

Single

Other (please specify):-
