

# APPLICATION FORM

## ELMFIELD HOUSE

TITLE: Mr/ Mrs/ Miss/ Ms.

SURNAME

FIRST & MIDDLE NAMES

DATE OF BIRTH

NATIONAL INSURANCE NUMBER

ADDRESS

<hr/> <hr/> <hr/> <p>POSTCODE _____</p>
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EMAIL ADDRESS \_\_\_\_\_

MOBILE NUMBER \_\_\_\_\_

NEXT OF KIN DETAILS (in case of emergency)

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

POSTCODE \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

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**POSITION APPLIED FOR:**

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**CV SUBMITTED?**

YES	NO	(please circle)
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Current regulations require a DBS disclosure and Barring Service check to be carried out by our company on any new employee even if a check has been done by your previous employer.

You are required to declare any convictions or cautions you may have, even if they would otherwise be regarded as 'spent' under the rehabilitation of Offenders Act 1974.

Have you any convictions to declare? YES NO  
(please circle)

Have you given notice to your current employer? YES NO

**FULL EMPLOYMENT HISTORY** (most recent position first)

You must provide dates of when you worked in each establishment, explain any gaps in employment and go back to leaving school.

Employer	Date started	Date left	Reason for leaving?


Has there been any disciplinary action in any previous employment?

YES

NO

(Please circle)

If yes; please give details

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QUALIFICATIONS:

Please detail all of your professional qualifications. The original of any certificate or diploma must be submitted with your application

Date	Where did you study?	Qualification obtained and grade?

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**HOBBIES AND INTERESTS:**

What do you like to do in your spare time?

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**PERSONAL STATEMENT:**

Please provide some information about yourself and your skills and experience in health and social care which may enhance your application:

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**REFERENCES:**

Please provide two referees to give a character reference to determine suitability for the position you have applied for.

Name:		
Address:		
Telephone number:		
Email address:		

**HOLIDAY COMMITMENTS:**

Please provide dates and details of any holiday commitments you have in the next twelve months.

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**SICKNESS:**

Please provide details of any sickness you have experienced in the past twelve months which has resulted in you having time off work.

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**OTHER INFORMATION:**

Please feel free to add anything else which you would like to make the manager aware of:

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**DECLARATION:**

I confirm that to the best of my knowledge and belief, the above information is correct and accurate. I understand that my employer may take steps to verify this information and that giving false information is a disciplinary offence. Please note that any subsequent job offer may be conditional upon the satisfactory completion of an appropriate medical assessment. Elmfield House will ensure that any medical assessment is appropriate to the tasks of the job role offered. However, by signing the enclosed declaration, you are stating that you are happy to undergo the necessary assessment.

Also by signing this declaration you confirm that you are entitled to work in the UK. If a job offer is made you will need to produce your UK passport, a passport from a country within the European Economic Area (EEA), or a passport from a non EEA country which gives you the right to work in the UK, the company will need to see one or more of these documents should an offer be made.

Applicants name: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Elmfield House: Interview check list.

Name	
Position applied for	
Personal appearance	
Manner	
Speech / conversation	
General enthusiasm	
Personality	
Ambition / likely progression	
Technical skills and knowledge	
Knowledge of the company / competitors	
Enthusiasm for position	
Training needs for the job	
General Impression	
Short listed ?	
Recommendation	
Signed:.....	
Position.....	Date.....