

Greystones Nursing Home

9 Parsons Road, Heaton, Bradford, West Yorkshire, BD9 4DW
Tel: (01274) 542625

Employment Application Form

Position Applied for:

Please tell us how you heard about this vacancy:

Personal Details

Surname:

D.O.B:

First Name/ s:

Address:

Mobile Phone Number:

House Phone Number:

DBS No

Update Service

Email Address:

National Insurance No:

Are you free to remain and take up employment in the UK?

(Please tick as appropriate)

Yes

No

You will be required to provide appropriate documentary evidence of this at interview. For examples of acceptable documents please see www.ukba.homeoffice.gov.uk

Driving Licence (if relevant to the post applied for)

Do you hold a full, clean driving licence valid in the UK?

Yes

No

If no, please give details below:

Convictions/ Disqualifications

Upon offer of employment we reserve the right to request a Criminal Records Bureau Disclosure at Standard level and this disclosure will include details of cautions, reprimands or final warnings as well as convictions.

Please provide details below of any convictions which are not spent under the terms of the Rehabilitation of Offenders Act 1974:

Additional Information

Please give a brief narrative as to why you have chosen caring as a career

Employment History

Previous Employment: Please include any previous experience (paid or unpaid), starting with the most recent first.

Current or most recent employer**Name of Employer:****Address:****Position Held:****Date Started:****Reasons for****Date Finished:****Leaving:****Salary on leaving this post:****Notice Period:****Brief description of duties:**

PLEASE GIVE DETAILS OF EMPLOYMENT HISTORY FOR THE PAST 10 YEARS (IF APPLYING FOR A MANAGERIAL POSITION PLEASE GIVE 15 YEARS), IN SEQUENCE WITH MOST RECENT FIRST. *Continue on a separate sheet if necessary.*

Name of Employer:			
Address:			
Position Held:			
Date Started:		Reasons for	
Date Finished:		Leaving:	
Brief description of duties:			

References	
<i>Please give the names and addresses of your two most recent employers (if applicable). If you are unable to do this, please clearly outline who your referees are.</i>	
Reference 1	
Name:	
Job Title:	
Organisation:	
Address:	
Contact Number:	
Email Address:	
Do you wish to be consulted before this referee is approached? (please circle)	
Yes	No

Reference 2	
Name:	
Job Title:	
Organisation:	
Address:	
Contact Number:	
Email Address:	
Do you wish to be consulted before this referee is approached? <i>(please circle)</i>	
<p>Yes No</p>	

Equal Opportunities Policy and Monitoring	
<p>A Statement of Policy Greystones Nursing Home strives to be an equal opportunities employer. It aims to ensure that no job applicant or employee receives less favourable treatment on the grounds of race, colour, nationality, religion, ethnic or national origins, sex, marital status, sexual orientation or disability. Selection criteria and procedures will be reviewed to ensure that individuals are selected, promoted and treated on the basis of their relevant merits and abilities.</p>	
<p>Recruitment Procedures Prior to advertising posts, a job description is prepared. This provide the basis for selection of candidates for interview. Shortlisting for interview is on the basis of completed application forms and their relation to the job description and person specification. It is undertaken independently by at least two people. Interviews aim to allow candidates and the panel to find out about each other through structured and common questions to all candidates and specific questions to individuals.</p>	
<p>Monitoring In order to ensure the continued development of our Equal Opportunities Policy, all applicants are asked to complete this form. The information will be used solely for monitoring purposes, treated as confidential and separated on receipt and before consideration of candidates takes place. All forms received are monitored against successful applicants and policy and practice reviewed.</p>	
I would describe my cultural and ethnic origin as:	
White British	Irish
White European	White other (please specify)
Black Caribbean	Black other (please specify)
Indian	Pakistani
Bangladeshi	Chinese
Other Asian group	Other (please specify)
Please fill in the below:	
I identify my gender as	<i>(please fill in the blank space)</i>

Disability Codes:			
Visual Impairment		Hearing Impairment	
Disability Affecting Mobility		Other Physical Disability	
Other Medical Condition (e.g. asthma, diabetes)		Emotional/Behavioural Difficulties	
Mental Ill Health		Temporary Disability after Illness/Accident	
Profound Complex Disabilities		Multiple Disabilities	
Other		No Disability	
<u>Please list vaccinations</u>			

Declaration
<p>Statement to be Signed by the Applicant <i>(Candidates selected for interview will normally be notified within four weeks of the closing date.)</i></p> <p>Please complete the following declaration and sign it in the appropriate place below. If this declaration is not completed and signed, your application will not be considered:</p> <p><i>I agree that Greystones Nursing Home can create and maintain computer and paper records of my personal data and that this will be processed and stored in accordance with the Data Protection Act 1998.</i></p> <p><i>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.</i></p> <p><i>PLEASE NOTE: If you haven't heard from us within 4 weeks than your application has been unsuccessful.</i></p>
Signed:
Date: