**BLOSSOMS CARE SERVICES**

****

Creating Independence and Opportunity For Vulnerable Adults

|  |  |  |
| --- | --- | --- |
| **CONFIDENTIAL APPLICATION FORM**  PERSONAL DETAILS: Please complete as fully as you can. If you have a current cv, please attach a copy  **Return to: 15-16 Eaves Court, Bonham Drive, Eurolink, Sittingbourne, Kent, ME10 3RY Phone 01795 422186** | | |
| Position Applied For | Title & First Name’s | Surname | |
| Address |  |  | |
| Postcode | Home Phone Number | Mobile Phone Number | |
| National Insurance Number | Driving Licence Held ? | Car Owner ? | |
| Are you eligible to work in this country ? | Work Permit Number (If Applicable) | Expiry Date | |
| Email address | First Language | Additional Languages | |
| Next of Kin name and phone no | How did you learn about this vacancy | Do you hold current professional indemnity insurance? If yes, please bring certificate with you to the interview | |
| Would you support an individual that smokes? | Can you work over Christmas / New Year ? | Do you have any phobias ? | |
| Can you work overtime when needed ? | Your sickness in the last 12 months | Any other family members work in Care ? | |
| Do you feel all people should have choice, independence and rights ? | Prior commitments made / holidays booked | Notice period / Earliest start date for employment | |
| Tell me when you can work each day | Monday’s | Tuesday’s | |
| Wednesday’s | Thursday’s | Friday’s | |
| Saturday’s | Sunday’s | Can you work nights ? if yes what nights | |

|  |  |  |
| --- | --- | --- |
| EDUCATION & TRAINING DETAILS  Please give details of secondary education, further education & training courses attended, including dates & qualifications | | |
| Schools / Colleges / Centres | Dates From / To | Courses / Exams / Training | |
|  |  |  | |
|  |  |  | |
|  |  |  | |
|  |  |  | |
|  |  |  | |
|  |  |  | |
|  |  |  | |
|  |  |  | |
|  |  |  | |
|  |  |  | |
|  |  |  | |
|  |  |  | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| EMPLOYMENT HISTORY | | | | | | |
| Current / Last employer | | | Position held | | Dates | | |
| Address | | |  | |  | | |
| Responsibilities / Tasks Undertaken | | |  | |  | | |
|  | | |  | |  | | |
| Annual gross salary | | | Other benefits | |  | | |
| Reason for leaving/wishing to leave | | |  | |  | | |
|  | | |  | |  | | |
| PREVIOUS EMPLOYMENT  EMPLOYMENT HISTORY -Please provide a full working History from school leaving age to current, and any explanations for any gaps in employment. | | | | | | |
| Dates | | Employer / Company Name | | Position and Responsibilities | | Salary and Reason for Leaving | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
|  | |  | |  | |  | |
| ADDITIONAL INFORMATION  Please give any further information not previously covered that you feel is important to support your application for the position. This may include skills, knowledge, interests, personal attributes or ambitions. | | | | | | |
|  |  | | |  | |  | |
|  |  | | |  | |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| REFERENCES  Please give four references with landline and mobile phone numbers, email Addresses and addresses, including your current or last employer. Please note that job offers may be subject to the receipt of satisfactory references. | | | |
| Reference 1 (Current or last employer) |  | Reference 2 (Friend or family member) |  | |
|  |  |  |  | |
| Reference 3 (Non related i.e. non family member) |  | Reference 4 (Non related i.e. non family member) |  | |
|  |  |  |  | |
| All references will require both verbal (phone) and written reference. Any reference not responded to in 7 days will put in jeopardy any offer of position with the company | | |  | |
| UNDERTAKING (Please read and sign the following undertaking)  I confirm that the entries I have made on this application form, to the best of my knowledge and belief, true in all respects. I understand that, should I have deliberately made a false statement on this form, any job offer could be withdrawn.  I authorise the Company to obtain references to support this application BEFORE an offer has been made and release the Company and referees from any liability caused by giving and receiving information. |  | Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | |
| GOOD REPUTATION AND CHARACTER  Where the response to any of the following is “YES” full details should be given. Although the information requested relates to the United Kingdom, information should also be given in respect of any comparable provisions, which apply overseas. Information about companies, partnerships or incorporated associations relates to information within the knowledge of the individual in question. | | | |
| Convictions? State whether you have any convictions by a court (whether civil or military) for offences (other than minor motoring offences) which are not “spent convictions“ within the Rehabilitation of Offenders Act 1974: or have you been subject to penalties for tax evasion: | | | |
| Police Check? Would you agree to a police check: and do you hold a current CRB/POVA certificates:  If you do hold current CRB/POVA certificates please supply details and ID numbers: | | | |
| Fraud etc ? State whether you have, in connection with the information or management of any company, partnership or unincorporated association, been adjudged by a court liable for any fraud, misfeasance, wrongful trading or other misconduct towards such a body or towards any member or creditor of such body: | | | |
| Criminal or Civil Proceedings? State whether you are currently engaged in (otherwise than in a professional legal capacity or as an expert witness or plaintiff) or the subject of, any criminal proceedings or (in relation to the individuals business or professional capacity) any civil proceedings or arbitration: | | | |
| Criminal Convictions? Because of the nature of the work for which you are applying, this post is exempt from the provisions of sections 4 (2) of the Rehabilitation of Offenders Act 1974, by virtue of the Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975. Applicants are therefore not entitled to withhold information about convictions which for any other purpose are “spent“ under the provisions of the Act. Failing to disclose such convictions could result in dismissal:  PLEASE GIVE DETAILS OF ANY CRIMINAL CONVICTIONS OR PROSECUTIONS PENDING: | | | |
| I declare that the statements are true, that I am now in and usually enjoy good physical and mental health. I understand that the non-disclosure or suppression of any relevant facts known by me may prejudice my application, or if appointed, could lead to the termination of my employment. I agreed that a medical report may be obtained from my doctor or hospital specialist.  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |