



## APPLICATION FOR EMPLOYMENT

(Confidential)

**CARE 24-7 Limited**  
**The School House**  
**20 Snowden Road**  
**Wrose**  
**Shipley**  
**BD18 1JD**  
**Tel: 01274 597711**  
**Fax: 01274 597722**

Full name and address (Please print in BLOCK CAPITALS)

Mr/Mrs/Miss/Ms or Other .....

Address .....

.....

.....

Post Code .....

Tel:..... Fax: ..... Email:.....

Male									
Female									
National Insurance number									
Do you have a current driving licence?	Yes								
	No								

**References:**

It is our policy to take up references. Please give names and addresses of two referees. One of them must be your present or most recent employer. References from relatives will not be accepted.

Give your former name if different from above.

Former Name .....
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Name of Referee and Status	Address for Contact	May we approach before interview?	
1.	Fax: Email:	Yes	
		No	
2.	Fax: Email	Yes	
		No	

Education and qualification details	Grades obtained	Where obtained	Date from	Date to
Training course details	Grades obtained	Where obtained	Date from	Date to

Do you have any language skills other than English?

Speak \_\_\_\_\_ Write \_\_\_\_\_      Speak \_\_\_\_\_ Write \_\_\_\_\_

Do you use Sign Language?       Indicate BSL Level

Are there any medical conditions that we should be aware of which may prevent you or make it difficult for you to carry out manual handling procedures?

Yes       No

If you answered Yes, please give details:

.....  
 .....  
 .....

**Current (most recent) Employer's Name and Address**

Name .....

Address .....

.....

.....

Telephone number .....

Position Held						
Date	from		to		Hours worked	
Reason for wishing to leave						
Brief details of duties						

Previous Employers Name and address	Position held	Date from	Date to	Reason for leaving

Please use this space to detail your skills, knowledge and experience you possess to become a Care Assistant. Include any voluntary, home based work and leisure activities. (use additional sheet if necessary)

Number of hours willing to work per week

Please give details of your availability to work below:

Days available	Times available to work					
	7 - 8	8 - 1	1 - 5	5 - 7	6 - 10	10 - 7
Mon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tue	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thur	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fri	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sun	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use this space if you wish to comment about your availability

Will you be using a car for work? Yes  No

How did you learn of this vacancy? \_\_\_\_\_  
\_\_\_\_\_

## EQUAL OPPORTUNITY

Care 24-7 Ltd operates an Equal Opportunities Policy. The Company is committed to the promotion of equal opportunities in all aspects of recruitment and employment. To ensure that this policy is effective, we ask all applicants to provide information as requested below. This information is only used for monitoring purposes and will not be used to discriminate in favour or against any applicant. All information will remain confidential.

<b>Date of Birth</b>				<b>Age</b>	
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The Disability Discrimination Act (1995) defines a person as having a disability if he/she has a physical or mental impairment which has a substantial and long term adverse effect on his/her ability to carry out normal day to day activities.	YES	NO
Do you consider yourself to have a disability?		
Would you like us to make any arrangements if you are interviewed?		

I would describe myself as (please tick)

<b>White:</b> English Scottish Welsh Irish Any other white	<b>Mixed:</b> White & Black Caribbean White and Black African White & Asian Any other mixed	<b>Asian or Black British:</b> Indian Pakistani Bangladeshi Kashmiri Any other Asian
<b>Black or Black British:</b> Caribbean African Any other Black	<b>Other Ethnic Groups:</b> Chinese Any other ethnic group	<i>These categories have been recommended by the Commission for Racial Equality.</i>

## DATA AND BARRING SERVICE

*Care 24-7 uses the Date and Barring Service (DBS) to assess applicants' suitability for positions of trust. Care 24-7 Ltd complies fully with the DBS Code of Practice and undertakes to treat all applicants for positions fairly. It undertakes not to discriminate unfairly against any subject of a Disclosure on the basis of conviction or other information revealed.*

*We encourage all applicants called for interview to provide details of their criminal record at an early stage in the application process. We request that this information is sent under a separate, confidential cover, to a designated person within Care 24-7 Ltd and we guarantee that this information is only seen by those who need to see it as part of the recruitment process.*

I confirm that to the best of my knowledge the information provided on this form is correct and gives true representation of me.

Signed ..... Date .....