

### **APPLICATION FORM**

## **PRIVATE & CONFIDENTIAL**

Position Applied For:	Where did you see this? Post advertised?		
PERSONAL DETAILS: (Block Letters Please)			
Surname:	First Names:		
Address:	Email:	Mobile No:	
Post Code:			
	Tel No: (Work)		
Do you hold a full driving licence?	Date of Birth:	National Insurance No:	
Car Available:			

## **EMPLOYMENT HISTORY: (Most recent job first)**

Dates From:	Employed To:	Name/Address of Employer	Job Title: Duties & Responsibilities	Salary

## 2. EDUCATION & QUALIFICATIONS (Please use extra sheet if necessary)

From:	To:	Name & Address of	Details of Qualifications/Courses
		Establishment	attended
OTHER IN	FORMATION		
Why do yo (Please us	u think your pro extra sheet if r	evious experience, whether at v	vork or otherwise is relevant to this job?
REASON I	FOR LEAVING	LAST EMPLOYMENT	

#### 3. MEDICAL HISTORY

Please give details of any disabilities, serious illnesses suffered in the past 2 years, days lost from work, hospitalisation etc. Do you have a disability you wish to tell us about? If so, are you			
registered disabled at a Job Centre (Green Card holder?)			
	, , , ,		
<b>REFERENCES</b> Give two refere If you do not wish your referees to			
		Occupa	ation:
1. Name			
Address:			
Daytime telephone no:			
Email:			
2. Name:		Occupa	ation:
Address:			
r tour occi			
Daytime telephone no:			
Email:			
AVAILABILITY			
Available to start work:	Number of hours availab	le:	Are you willing to work weekends?
			weekends:
<b>DECLARATION</b> I declare that to the best of my knowledge, the information I have given on this form is true in every			
respect.	nowioago, are information	i navo g	given on the form to true in every
Signature:			Date:

### Please return completed form to:

Exceed Support Services Ltd 400 Pavilion Drive, Northampton, Northamptonshire, NN4 7PA

**4.** Exceed Support Services Ltd is committed to an Equal Opportunities policy. In order to ensure the effectiveness of this policy, all applicants are asked to provide the following information, which will be treated in the strictest confidence.

i would describe mysell as:(pleas	e tick appropriate box)
(a) Female	[]
(b) Male	[]
(c) Black (African)	[]
(d) Black (Afro Caribbean)	[]
(e) Black (Asian)	[]
(f) White (British/European)	[]
(g) Cypriot (Greek)	[]
(h) Cypriot (Turkish)	[]
(i) Other (please specify)	[]

# **FOR OFFICE USE ONLY**

Application form sent:	Date:
Application form returned:	Date:
Invited to Interview:	Date:
Request References:	Date:
References received:	Date:
Rejection:	Date:
Offer made:	Date:
Start Date:	Date:
Induction pack:	Date:
Training:	Date:
Uniform/Tabard:	ID photo Y[] N[]

#### **CONFIDENTIAL**

DISCLOSURE OF CRIMINAL BACKGROUND OF THOSE WITH ACCESS TO CHILDREN AND VULNERABLE CLIENTS

Due to the nature of your appointment as Care Assistant/Domestic Assistant you should appreciate that <u>Exceed Support Services Ltd</u> must enquire into the character and background of all staff. It is therefore essential that in making your application, you disclose whether you have any convictions, bind-over orders or cautions and if so, for what offences.

The fact that a conviction, bind-over order, or caution has been recorded against you will not necessarily exclude you from consideration for this appointment.

Have you any convictions, bind-over orders, cautions	s or pending prosecutions? (See notes)
YES NO	Date / /
If yes please give details	
I give my permission for a Police Check to be made  Signed: Da	ate:
Surname:	Post applied for:
Forename:	Sex: M/F
Previous/other names:	Date of Birth: / /
(Including maiden names):	Place of Birth:
	Height:
Current address in full:	
	D (0.1
If lead them E years places sive previous address	Post Code:
If less than 5 years please give previous address Previous address in full:	
Previous address in full.	
	Post Code:
As from (date): / /	1 001 0000.
I declare that the information I have given is correct. information will result in the termination of my contract.	
Signature:	Date:
Signed:	
Date:	

Date of next review: