

Lukka Care Homes

STRICTLY CONFIDENTIAL

APPLICATION FOR EMPLOYMENT

WORK LOCATION:

POST APPLIED FOR: DATE:

**THE INFORMATION REQUESTED WILL BE TREATED AS CONFIDENTIAL AND IS
REQUIRED TO ENSURE THE WELLBEING OF RESIDENTS AND STAFF IN THE HOME**

PART 1 Surname: Date of Birth/...../19.....

First Names: Title:(Mr/Mrs/Miss/Ms)

Previous Name (if applicable):

Full Address:

.....

Tel.No: Nat.Ins.No:

PART 2 We are an Equal Opportunity Employer. The aim of our policy is to ensure that no job applicant or employee receives less favourable treatment on the grounds of race, colour, creed, nationality, ethnic or national origin, religious belief, political opinion or affiliation, sex, marital status, sexual orientation or disability, or is disadvantaged by conditions or requirements which cannot be shown to be justifiable.

Our selection criteria and procedures are frequently reviewed to ensure that individuals are selected, promoted and treated on the basis of their relevant merits and abilities.

All employees are given equal opportunity and are encouraged to progress within the organisation.

We are committed to an ongoing programme of action to make this policy fully effective. To ensure that this policy is fully and fairly implemented and monitored, and for no other reason, would you please provide the following information:

I would describe my ethnic origin, nationality and sex as: (please tick)

White Black-Caribbean Black - African Black Other (Please specify)

.....

Indian Pakistani Bangladeshi Chinese Other (Please specify)

.....

Nationality: Male Female

Signed: Date:

THIS PAGE TO BE KEPT AS PART OF THE EQUAL OPPORTUNITIES POLICY WHETHER EMPLOYMENT IS OFFERED OR NOT.

NAME OF APPLICANT: DOB:

ADDRESS:

PART 3 QUALIFICATIONS

<u>Qualification</u>	<u>Institution</u>	<u>From</u>	<u>To</u>
.....
.....
.....

NMC PIN No: Expiry Date:
(Qualified Nurses only)

TRAINING AND COURSES

Provide details of any courses and further training you have undertaken:

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

PART 4 (A) Have you been convicted of a criminal offence, or currently undergoing a criminal investigation Yes No

(Because of the nature of the work for which you are applying, this application is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. Applicants are therefore not entitled to withhold information about convictions which for other purposes are 'spent' under the provisions of the Act). All information will be treated in strictest confidence

(B) If you are successful at interview we will require a Criminal Records Bureau check to be completed which will show any cautions or convictions. Your employment will be conditional on the satisfactory outcome of this check which we are required by law to carry out.

(C) Having a criminal record will not necessarily bar you from working with us. This will depend on the nature of the position and the circumstances and background of your offences.

PART 5 JOB HISTORY:

Title of present or most recent position:

Name, address and telephone number of present employer:

..... Tel. No:

Date of starting in present or most recent position:/...../.....

Salary/Wage: £ Pay Scale (if any):

Reason for Leaving:

Brief description of main duties and responsibilities:

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

Hours of availability:

(Continue on a separate sheet if necessary)

PART 6 Please give below names and addresses and telephone numbers of two referees, one being your present or most recent employer (Line Manager). Relatives are not allowed. (*Referees are not usually contacted unless you are shortlisted for an interview*)

Name of first referee:

Address:

..... Tel. No:

Name of second referee:

Address:

..... Tel. No:

PART 7 Further information in support of this application: (*Please use additional sheet or enclose your CV*)

DECLARATION: *I declare that the information contained in this application is to the best of my knowledge true and complete. I understand that if I have given untrue or misleading information this may result in disciplinary action and/or dismissal.*

Signed: **Date:**