



**306 Aigburth Road
Aigburth
Liverpool
L17 9PW
Established 2001
Tel: 0151 726 8060**

APPLICATION FORM

Position applied for: Social Care Worker

The following information will be treated in the strictest confidence. If offered employment, we are required to check your up to date DBS status before you are permitted to start work. Note: Minimum Age Legalisation dictates that care workers must be 16 years old or older.

First Name: _____

Surname: _____

Address: _____

Postcode: _____

Mobile/Home telephone number: _____

E-Mail address _____

Age under 18 18-25

Do you have access to a car to be used for work? Yes / No

Do you need a work permit to take up employment in the U.K.? Yes / No

Have you ever worked for the Company before? Yes / No

How much notice are you required to give to your current employer? _____

How did you hear about the company?

(If recommended by someone, please provide their name)

REFERENCES

Please provide full details (Full name, address, telephone number, email) of **two references**. One professional and one character. Referees must not be from friends or relatives.

Professional Referee:

Name:	
Job title:	
Address:	
Post code:	
E-Mail:	
Tel No:	

Character Referee:

Name:	
Job title:	
Address:	
Post code:	
E-Mail:	
Tel No:	

EMPLOYMENT HISTORY

Please fill in your employment history for the past 5 years starting with the most recent.

Name and address of your most recent employer:	
Date employed:	
Nature of business:	
Position held and reason for leaving:	

Do you have any convictions, cautions, reprimands or final warnings that are not "protected" as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013) by SI 2013 1198? (A copy of the Company's Equal Opportunities Policy and Disclosure and Disclosure Information Policy is available on request. These reflect the DBS Code of Practice).

Please give full details.

Declaration

I declare that the information given in this form is complete and accurate. I understand that any false information or deliberate omissions will disqualify me from employment or may render me liable to summary dismissal. I understand these details will be held in confidence by the Company, for the purposes of ongoing personnel administration and payroll administration in compliance with the General Data Protection Regulations. I undertake to notify the Company immediately of any changes to the above details.

The information you provide on this form will be used to progress your application for your employment and, if your application is successful, it will be added to your staff file. The information will be kept on file while you are working with us and for six years after you leave. If your application is unsuccessful, your information will be held for 12 months and will then be erased from our system. You have the right to ask at any time and at no cost to see your records, edit them, have them erased or stop us using them. If we cannot comply with your request, we will tell you why.

Given the nature of the job for which I have applied, I understand that any offer of employment will be subject to information on my criminal record being disclosed to the Company by the Disclosure Barring Service. (Please note that the amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are 'protected' and are not subject to disclosure to employers, and cannot be taken into account. Guidance and criteria on the filtering of these cautions and convictions can be found at the Disclosure and Barring Service website.)

I consent to my information given in this application being held and used for the purposes described above.

Signed: _____

Printed: _____

Date: _____