

# ST VINCENT'S NURSING HOME



*Magnificat anima mea Dominum*

## EMPLOYMENT APPLICATION FORM

**Wiltshire Lane  
Eastcote  
Pinner  
Middlesex HA5 2NB**



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You are referred to the Recruitment Privacy Notice on our website. Please complete this form as fully as possible, using **BLACK INK**. Knowingly withholding, falsifying or omitting relevant information at any stage of the selection process may lead to subsequent disciplinary action, including dismissal.

Job Title

## Personal Details

Surname/Family Name			
First Name(s)			
Title			
UK National Insurance No.			
Address			
Postcode			
Home Telephone		Mobile Telephone	
Email address			
Do you have the right to work in the UK? (tick one box)			
<input type="checkbox"/> Yes <input type="checkbox"/> No but I am applying <input type="checkbox"/> No			
Details of any permit currently held			
Preferred Employment Type (tick one box)	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		

## General Education

Please state the most recent qualifications first.

Include in this section all relevant qualifications. Please also indicate subjects currently being studied.

Secondary School/College/ University	Dates of Attendance		Qualifications obtained/ Year
	From:	To:	

## Professional Qualifications/Vocational Training/Registration

For all applicants in respect of posts requiring statutory registration or Professional/Vocational Qualifications, successful candidates will be required to produce current registration certificates prior to commencement of employment. Please also indicate subjects currently being studied.

Qualification/Training (Please state the most recent qualifications first.)	Qualification Dates	Registration/PIN No (if applicable)

## Current/Last Employment

Employer Name			
Address			
Post Code			
Organisation		Telephone No.	
Job Title			
Start Date		End Date	
Reasons for leaving			

## Previous Employment

**Please provide below details of your FULL employment history, starting with your current or most recent job (including that included on previous page). Please explain the reason for any gaps during your employment history.  
(Continue on a separate sheet if necessary)  
Please state your current or most recent employment first.**

Employer's Name and Address	Dates	Position Held	Main Duties	Reason for Leaving

## References

Please give the names of two referees. For all positions you must supply **two references**. If you are, or have been, employed **one should be your most recent/current employer**. They may include your line manager or someone in a position of responsibility who can comment on your work experience, competence, personal qualities and suitability for the post. If you are a student please provide contact details of a teacher at your school, college or university. Referees will be approached prior to interview if appropriate.

### Referee 1

Name	
Job Title	
Address	
Post Code	
Telephone	
Email	
Relationship	

### Referee 2

Name	
Job Title	
Address	
Post Code	
Telephone	
Email	
Relationship	

## Care Standards Act 2000

*Due to the nature of the position you are applying for, you are **not** entitled to withhold information about criminal convictions or cautions, however long ago these occurred. Therefore you are asked to sign the Declaration below which includes reference to this section regarding criminal offences. All offers of employment will be conditional on receipt of a satisfactory Disclosure & Barring Service Check. Having a criminal record will not necessarily prevent someone from working at the Home. However, this will depend on the nature of the position and circumstances and background of the offences. Failure to disclose any information relevant to the above could result in disciplinary action, which may lead to dismissal, should you be employed.*

Have you at any time received, or had pending, a court conviction

Yes

No

*If the answer is yes please give details below.*

### Declaration:

*I understand that my appointment will be subject to satisfactory health clearance, references, this Declaration and any statutory requirements. I declare that the information on this form and any supporting evidence is true and complete and I understand that any false information may render an offer of employment invalid and lead to termination of employment. I also understand that the information I have provided will be processed in accordance with the General and Recruitment Privacy Notice on the website which I have read and understood. I give my further explicit consent for this processing to take place within the remit of current Data Protection legislation.*

Signature:

Date:

### Care Home Use Only:

Items to check:	Yes	NA
Letter inviting candidate to interview		
Job Description/Person Specification		
Declaration Form		
Interview Form		
Passport seen and copy made		
Work Permit seen and copy made		
Written Reference 1		
Written Reference 2		
Recent certified Photograph obtained		
DBS Clearance		
Offer Letter		
Contract of Employment		
Health Questionnaire		