

Post Applied for:

REAGLE HOME CARE SERVICES

Application Form

THE INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE.

You must provide the following at interview. Applicants without this documentation may have their application rejected.

1. Two forms of identification (preferably passport and driving licence)

OFFICE USE ONLY

Additional ID?

2. An official letter with YOUR name and address on it (eg. Phone Bill/ Bank Statement etc).

3. Proof of 'Right to Work in the UK' (if you do not hold an EU passport)							
Section 1	Personal de	etails					
Title:	Last Name:						
First Names:							
Address:							
Postcode:							
Passport #							
Nationality							
Dr. License #							
Home Telephon	e Number:						
Mobile Telephor	ne Number:						
E-mail address:							
National Insurar	nce Number:						
Are you eligible	to work in the UK	?	Yes	No			
Do you hold a full valid UK driving license?							
If yes, Do you ha	ave any points or	convictions etc?	·:				

Availability for training



Available for work: Actio	OII
Training Record	
	Certificate Obtained & Date
Name of training school:	
Please state current Salary Package includi	ling benefits & holidays:
Section 2 Rehabilitation of C	Offenders Act
Have you ever been convicted of a criminal	I offence? Yes No
Have you any prosecutions pending?	Yes No
If yes, please give details / dates of offence	e(s) and sentence:
(This information will be disclosed by the Crimi successful. Please note a criminal record will n	ninal Records Bureau check which will be required if not necessarily be a bar to employment)



Soct	ion 3	Health						
				1				
Number of days absent in the last 2 years:								
Please	Please state number of times in the last 2 years:							
Are you	u regist	ered disabled?		YES	No			
If yes p	lease pr	ovide your disability n	umber and details:					
Sect	ion 4	Education						
Sect	ion 4)	antinua Co	sing of (On	
		Education Name of School	Examinations tak	en and G	Qualific	cations Ga	ained (Sp	ecify Grades)
Date	Date			en and C	Qualifid	cations Ga	ained (Sp	ecify Grades)
Date	Date			en and C	Qualific	cations Ga	ained (Sp	ecify Grades)
Date	Date			en and C	Qualific	cations Ga	ained (Sp	ecify Grades)
Date	Date			en and G	Qualific	cations Ga	ained (Sp	ecify Grades)
Date	Date			en and G	Qualific	cations Ga	ained (Sp	ecify Grades)
Date	Date			en and G	Qualific	cations Ga	ained (Sp	ecify Grades)
Date	Date			en and G	Qualific	cations Ga	ained (Sp	ecify Grades)
Date	Date			en and C	Qualific	cations Ga	ained (Sp	ecify Grades)
Date	Date			en and C	Qualific	cations Ga	ained (Sp	ecify Grades)
Date	Date			en and C	Qualific	cations Ga	ained (Sp	ecify Grades)



Section 5 Employment Record

Please list chronologically, starting with current or last employer

Name and Address of	Date	Date	Job Title/Job Function/ Responsibilities:	Salary and Reason for
Employer	From:	То:		Reason for Leaving
				Leaving



Please continue on a separate pag	e if required	I			
Section 6 Persona	l Attribute	es			
Section 7 Refer	ences				
Please give the names and addresses of your two most recent employers (if applicable). If you are unable to do this, please clearly outline who your referees are.					
Can we contact your curren	at employer be	oforo intorviow? Vos	/No		

Reference 1 Reference 2 Name: Name: **Their Position Their Position** (job title): (job title): Work Work Relationship: Relationship: Organisation: Organisation: **Dates Dates Employed:** From: To: From: To: Employed:



Address				Address	:]
Postcode)			Postcod	e		
Telephor	ne N	12:		Telepho	ne Nº:		
E-mail:				E-mail:			
Section	on	8 Decl	aration				
applicate employr employr docume consent	le) nen nen nta to	is both truthfu it. I understand it in jeopardy. I ry evidence of personal data	I and accurate. I have that any false misted understand that any right to work in contained within this	ve omitte eading s ny emplo the UK a is form b	ed no fa tatemer yment e and satis eing red	nd within my Curriculum Vitae if acts that could affect my ents could place any subsequent entered into is subject to isfactory references. I expressly ecorded for the purposes of any subsequent personnel file.	
Signe	d:				Date:		
Reagle Home Care Services undertakes that it will treat any personal information that you provide to us, or that we obtain from you, in accordance with the requirements of the Data Protection Act 1998. After initial assessment, Reagle Home Care Services may keep your details on file pending suitable opportunities that may arise in the future. Please tick if you do not wish us to hold your details.							
Section	on	9 Recr	uitment Moni	itoring	For	m	
Applicati	on	for the post of:					

This sheet will be separated from your application form upon receipt and does not form part of the selection process. It will be retained by Human Resources purely for monitoring purposes.



To help us ensure that our Equal Opportunities Policy is fully and fairly implemented please COMPLETE THIS SECTION OF THE APPLICATION FORM.

What is your Ethnic Group?

Choose ONE section from A to E, and then tick the appropriate box to indicate your cultural background.

A.	White	В.	Black or Black British	
	White UK		Black Caribbean	
	Irish		Black African	
	White non-UK		Any other Black background (please give details):	
	Any other White background (please give details):			
C.	Mixed	D.	Chinese or other ethnic group	
	White & Black Caribbean		Chinese	
	White & Black African		Vietnamese	
	White & Asian		Any other ethnic background (please give details):	
	Any other Mixed background (please give details):		(prodoc give detaile).	
E.	Asian or Asian British	F.	I do not wish to provide this information	
	Indian			
	Pakistani			
	Bangladeshi			
	Any other Asian background (please give details):			

Gender



Male		Female			
Disability					
		mental impairment mal day to day ac		ubstantial and long	g term adverse effect
Do you consider	yourself disable	d? Yes	No		
If yes, please giv	e details:				
Age Group					
16-25		26-35		36-45	
46-55		56-65		66-70	
Over 70					
Media					
Please state who	ere you saw this po	ost advertised			

Asylum and Immigration Act 1996

It is now a requirement that before any offer of employment can be made, all candidates are to provide confirmation of their eligibility to work in the UK. Please bring one of the following original documents with you if invited to interview: a passport or an immigration and nationality directorate application registration card which evidence the right to work in the UK or a UK residence permit issued to an EEA national which confirms right of entry to or residence in the UK.



Availability

Please read this <u>before</u> you complete the Availability Form: Standard working requirements are five days each week plus alternative weekends. It is not a requirement that Care Workers should work more than one period per day but you are free to commit to as many as you would like to. Hours are not guaranteed and shift periods are for illustration only. Payment is made for 'contact time' only.

Important: This availability will form the basis of any employment offer, and if you are accepted, forms a commitment on your part.

Availability Form	Weekdays	Weekends
7am to 2pm	Tick if available	Tick if available
2pm to 4pm	Tick if available	Tick if available
4pm to 10.30pm	Tick if available	Tick if available

•	Total num	ber of hours	per week	you are seeking	
---	-----------	--------------	----------	-----------------	--

Please note that the amount of work is variable and that staff may not be working throughout the periods marked above as 'available'.