



## Apple Tree Care Home Application for Employment Form

Job applied for: ..... For Office Use: .....

*When completed, please return form to: The Office Manager, Apple Tree Care Home, Ox Carr Lane, Strensall, York YO32 5TD.*

We are committed to promoting the equality of opportunity and welcome applications from anyone who feels that they are able to carry out the duties, regardless of any previous experience.

### **Please tell us about yourself**

Surname: ..... First name: .....

Other previous names:..... Date of birth :(optional) .....

Home address: .....

.....

Post code:.....

Home tel. no: .....Email: .....

Mobile no: ..... Current driving licence: YES / NO

Marital Status: .....

National Insurance No: .....

May we ring you at work? YES / NO

Work tel. no: .....

Are you related to any present or former employees of the home? YES /NO

How did you find out about this vacancy? .....



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Please give us the details of **two people** who will provide us with a reference for you. One should normally be your current employer. If this is not the case, please tell us why not on a separate sheet of paper. We will not contact your employer before an interview, but we will contact them before appointment.

Name: ..... Position: .....

Organisation: .....

Address: .....

.....

Postcode.....

Tel. No: .....Email: .....

Is this your current employer? YES/NO

Are they related to you? YES/NO

Name: ..... Position: .....

Organisation: .....

Address: .....

.....

Postcode.....

Tel. No: ..... Email: .....

Is this your current employer? YES/NO

Are they related to you? YES/NO



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**Please tell us about your education and training**

Please tell us about your education. List any qualifications gained:

School/college	From	To	Qualifications – incl. grades and dates

**Please tell us about jobs you have had**

Please detail your full employment history starting with your present or most recent job first. Please also provide details of any gaps in your employment history e.g. unemployment, bringing up family etc.

Present/most recent employer	Job Title	Wages/rate of pay	From	To	Reason for leaving



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Previous employer	Job Title	Wages/rate of pay	From	To	Reason for leaving

*Please continue on a separate piece of paper if necessary.*

**Skills and Experience: further information**

**Please use this space to tell us about any other information that you feel will help your application, including any training or voluntary work, skills or experience you may have:**



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Name & Telephone No: in case of Emergency (Notify)						
Name and Address of Doctor:						
<b>Hours/Days - Required/Available</b>						
Mon	Tue	Wed	Thur	Fri	Sat	Sun

### **Declarations of Convictions / Disclosure of Information**

Successful applicants will be asked to provide disclosure information as required under section 113 of the Police Act 1997. Disclosure information will not be used unfairly and a criminal record will not necessarily be a bar to obtaining the position applied for. No offer of employment will be withdrawn without discussion with the applicant.

**I certify that the information given in this application is true and accurate to the best of my knowledge. I also understand that if I am appointed and this information is subsequently found to be false, I might be dismissed.**

**Signed .....** **Date .....**

### **Data Protection Information**

*The information you have supplied on this form will be processed and may be held on computer. If you are appointed it will also be held on your personal records file. The information will also be used for equality monitoring and statistical purposes. By signing this application you will be deemed to have given your consent to this, including any information which may be considered to be sensitive and personal.*