

Lukka Care Homes

APPLICATION FOR EMPLOYMENT

WORK LOCATION:

POST APPLIED FOR:

Hours and Days of availability:
.....

***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:

First Names: Title :

Previous Name *(if applicable)*:

Full Address:
.....

Tel.No: Mobile.....

Nat.Ins.No:email

In the event of an emergency please give details of Next of Kin contact details:

Name contact number

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 at your expense 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:

(A) Have you been disciplined or been part of a disciplinary process at any time in your employment in the last 12 months years?

Yes No

Title of present or most recent position:

Name, address and telephone number of present or most recent 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:.....

.....
.....

.

PREVIOUS POSITIONS FOR PAST 10 YEARS *(most recent first)*

| POSITION AND EMPLOYER | MAIN DUTIES | FROM | TO | REASON FOR LEAVING |
|------------------------------|--------------------|-------------|-----------|---------------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

(Continue on a separate sheet if necessary)

PART 6 Please give below names and addresses and telephone numbers of three referees combination of which should be:- (one being your present or most recent employer) two work references OR one work reference and two character references OR (if no work referees are available,) three character references. Relatives are not allowed. (*Referees are not usually contacted unless you are shortlisted for an interview*)

Name of first referee: **work/character**

.....

Position:.....

Address:

.....Post Code..... Tel. No:

Name of second referee: **work/character**

.....

Position:.....

Address:

.....Post Code..... Tel. No:

Name of third referee: **work/character**

.....

Position:.....

Address:

.....Post Code..... Tel. No:

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

NOTE : please assume you have been unsuccessful if you have not heard back from us within four weeks of your application. Thank you for your interest in Lukka Care Homes

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:

| |
|--|
| |
|--|

