

Please complete all sections on the form accurately, giving full details of your skills and experience relevant to the post. If any section does not apply, enter 'not applicable' or 'N/A'.

Job Title:
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Title	Surname / Family Name	Forename/s

Previous names:

Home address including postcode	Telephone - home
	Telephone - mobile
	E-mail address

National Insurance (NI) Number	Do you require a permit to work at the home? Please give details.

Do you hold a current full driving licence?	Yes / No
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Registered nurse only: NMC PIN number	Expiry date (evidence will be requested at interview)

**References:** Please give name, address and occupation/position of two referees. One must be your present or most recent employer. Testimonials from relatives or friends are not acceptable.

Name:	Name:
Position:	Position:
Organisation:	Organisation:
Address:	Address:
Tel:	Tel:

**Employment:** *Please give full details of your past employment and experience. Please detail and explain any gaps (e.g. bringing up a family or career break). Continue on a separate sheet if necessary.*

From		To		Employer, contact name and full address with postcode	Job Title	Reason for leaving
Mth	Yr	Mth	Yr			

*If not explained in the above table, please give full details of any gaps in employment here.*

From		To		Reason for gap in employment
Mth	Yr	Mth	Yr	

**Education:** *Please give details of your Education and Qualifications - please start with secondary education*

From		To		Secondary school / college / university	Examinations taken or to be taken	Results and Grades	Date Obtained
Mth	Yr	Mth	Yr				

**Training and Continuous Professional Development;** *Please list any training courses which you have undertaken which are relevant to the job*

Mth/Year	Organising Body	Course Title	Duration

**Experience / skills:** *Please give specific information in support of your application. Continue on a separate sheet of paper if necessary*

**The information supplied in this application form is accurate to the best of my knowledge.**

**Signed** \_\_\_\_\_ **Dated** \_\_\_\_\_

**Criminal Convictions Declaration**

Chilton Care Homes Limited is committed to safeguarding and promoting the welfare of its residents and expects all staff to share that commitment. As the job for which you are applying involves substantial opportunity of access to vulnerable adults, it is exempted from the provisions of the Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975. Therefore, you are required to disclose any and all current or 'spent' criminal convictions, cautions, reprimands, bind-overs or warnings you may have incurred, regardless of how long ago.

Any information given will be treated in confidence and used only in connection with this application. Chilton Care Homes Limited complies fully with the CRB Code of Practice regarding the correct handling, use, storage, retention and disposal of disclosures and disclosure information. It also complies fully with its obligations under the Data Protection Act 1998 and other relevant legislation pertaining to the safe handling, use, storage, retention and disposal of disclosure information.

All applicants who are offered employment will be subject to an Enhanced Disclosure check from the Criminal Records Bureau before their appointment is confirmed. The disclosure of a current or spent conviction does not necessarily mean that your application will not be progressed or that an offer of employment cannot be confirmed, however failure to disclose something which later appears on your CRB Disclosure Certificate could result in an offer of employment being withdrawn or dismissal if already employed. The main consideration will be whether the nature or timing of the offence makes you unsuitable for work within a social care environment.

In addition to this disclosure, you are also required to declare to Chilton Care Homes Limited if you later become convicted of any criminal offence or become subject to any investigation regarding safeguarding issues at any time during your employment.

**Declaration: please complete either A or B below.**

**Declaration A**

**I have no criminal convictions or cautions, either considered spent or otherwise.**

**Signed** \_\_\_\_\_ **Dated** \_\_\_\_\_

**Declaration B**

**I have the following criminal convictions or cautions, including those considered spent:**

This includes the following:

- 1. Dates and nature of offences
- 2. Sentence received and circumstances surrounding the conviction
- 3. Any other information you feel we should know about, e.g. incidents with police involvement
- 4. Details of any current criminal investigations or pending prosecutions
- 5. Details of any investigations under Adult Protection / Safeguarding Adults procedures

*Please include dates and any other information you feel would be useful; continue on a separate sheet of paper if necessary.*

**Signed** \_\_\_\_\_ **Dated** \_\_\_\_\_

**I UNDERSTAND THAT EITHER WITHHOLDING OR GIVING FALSE INFORMATION WILL DISQUALIFY MY APPLICATION, OR, IF DISCOVERED AFTER APPOINTMENT, MAY BE GROUNDS FOR DISMISSAL**

**EQUAL OPPORTUNITIES MONITORING FORM –Part 1**

Chilton Care Homes Limited is committed to being an equal opportunities employer and we welcome applications from all sections of the community. We will ensure that all candidates for employment are treated fairly, and in order to monitor our responsibilities and to measure our progress towards widening diversity among our workforce, we would be grateful if you would answer the simple questions in the boxes below. The information you provide will remain anonymous and is for statistical monitoring purposes only. This form will be separated from your application upon receipt and is not used as part of the applicant selection process.

Job applied for: \_\_\_\_\_

BASIC DETAILS								
Your age range:	16 - 20	<input type="checkbox"/>	Your marital status:	Married / Civil partnership	<input type="checkbox"/>	Nationality:		
	21 - 25	<input type="checkbox"/>		Married / Separated	<input type="checkbox"/>		Your gender:	Male
	26 - 49	<input type="checkbox"/>		Divorced	<input type="checkbox"/>			Female
	50 - 60	<input type="checkbox"/>		Single	<input type="checkbox"/>			Transgender
	60+	<input type="checkbox"/>		Widowed	<input type="checkbox"/>			

ETHNICITY (2011 Census classification)					
Please tick the box alongside the category that you feel best describes your ethnic origin, using the 2011 Census classification					
WHITE	English, Welsh, Scottish, Northern Irish, British	<input type="checkbox"/>	MIXED RACE:	White and Black Caribbean	<input type="checkbox"/>
	Southern Irish	<input type="checkbox"/>		White and Black African	<input type="checkbox"/>
	Any other White background	<input type="checkbox"/>		White and Black Asian	<input type="checkbox"/>
	Gypsy or Irish Traveller	<input type="checkbox"/>			<input type="checkbox"/>
BLACK / AFRICAN / CARIBBEAN / BLACK BRITISH	African	<input type="checkbox"/>	ASIAN or ASIAN BRITISH:	Any other Mixed background	<input type="checkbox"/>
	Caribbean	<input type="checkbox"/>		Indian	<input type="checkbox"/>
	Any other Black background	<input type="checkbox"/>		Pakistani	<input type="checkbox"/>
ANY OTHER ETHNIC GROUP	Arab	<input type="checkbox"/>		Bangladeshi	<input type="checkbox"/>
	Other Ethnic group – write below	<input type="checkbox"/>		Chinese	<input type="checkbox"/>
			Any other Asian background	<input type="checkbox"/>	

**EQUAL OPPORTUNITIES MONITORING FORM – Part 2**

<b>RELIGION / BELIEF</b>			
Please indicate your religion / belief group			
Christian	<input type="checkbox"/>	Muslim / Islam	<input type="checkbox"/>
Adventist	<input type="checkbox"/>	Sikh	<input type="checkbox"/>
Judaism	<input type="checkbox"/>	Rastafarian	<input type="checkbox"/>
Mormon	<input type="checkbox"/>	Zoroastrian / Parsi	<input type="checkbox"/>
Buddhist	<input type="checkbox"/>	Bahá'í	<input type="checkbox"/>
Hindu	<input type="checkbox"/>	<i>No religion</i>	<input type="checkbox"/>
Jainism	<input type="checkbox"/>	<i>Do not wish to answer</i>	<input type="checkbox"/>

Thank you for your assistance.

