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| **Paul’s Place Form AP1****Application for Employment** |  |

**Private and Confidential**

**Reference Number**

**Return this Form, Form Ap2 and FormEO to**

**Return this form to Reference Number**

Mrs C Brooks

Paul’s Place, Serridge Lane, Coalpit Heath

 Bristol BS36 2TT Tel: 01454777236

Email:cbrooks@paulsplace.org.uk

**Position Applied for**

Chief Executive Officer

**Personal Information (name and contact details)**

Title:

Title: Email

**Name**  Forename(s): Tel No. (Home)

 Surname: Tel No. (Mobile)

 Address:

 Post Code: N. I. Number:

**Current Driving Licence**

Yes: No:

 Groups:

 Expiry Date: Details of Endorsements

**Are there any restrictions on you taking up employment in the UK**

 Yes: No:

 If Yes, please give details

|  |  |
| --- | --- |
| **Paul’s Place Form AP2****Application for Employment** | For Office Use: |
| Ref: |

**Private and Confidential**

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**Education** (please complete in full and use a separate sheet if necessary)

 Schools/College/University Names Qualifications Gained

**Employment** **History** (Please complete in full and use separate sheet if necessary)

 Name of Employer:

 Address:

 **Last/Current** Dates of Employment:

 **Employment** Job Title:

 Duties:

 Rate of Pay

 Reason for Leaving

 Notice Period

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 **Previous** Name of Employer:

 **Employment 1**  Address:

 Dates of Employment:

 Job Title:

 Duties:

 Rate of Pay:

**Previous** Name of Employer:

**Employment 2** Address:

 Dates of Employment;

 Job Title:

 Duties:

 Rate of Pay:

 Reason for Leaving:

**Training** Please give full details and dates of any relevant training courses undertaken

 Dates:

 Details:

Paul’s Place may ask you to undertake core training in: Safeguarding Adults First Aid

 Manual Handling Food Hygiene

 Equality and Diversity

Please note any professional bodies you are a member or registered with

**Current Membership of Professional bodies** (i.e. CIPD, NMC)

**Other Employment**

Please note any other employment that you would continue with if you were successful in obtaining the position:

**Leisure**

Please note here your leisure interests, sports, hobbies, other pastimes :

**Reference** (please note here two persons from who we may obtain both character and work experience references one of which must

 be your last employer)

eferences one of which mustbe yo

ur last employer

 Title:

 Forename(s):

 **Reference 1** Surname:

 Address:

 Post Code :

 Contact No.

 Position Held:

 May we approach the above prior to interview? Yes/No

 Title:

 Forename(s):

 **Reference 2** Surname:

 Address:

 Post Code:

 Contact No.

 Position held:

 May we approach the above prior to interview? Yes/No

**General** **Comments**

Please detail here your reasons for this application, your main achievements to date and the strengths you would bring to this post. Specifically, please detail how your knowledge, skills and experience meet the requirements of this role (as summarised in the person specification).

**Criminal** **Record**

**Please note any criminal convictions except those ‘spent’ under the Rehabilitation of Offenders Act 1974. If none please state. Employment is dependent upon obtaining a satisfactory Disclosure and Barring Certificate from the Disclosure and Barring Service/Disclosure Scotland**

**Declaration (**Please read carefully before signing)

1. I confirm that the information provided in this application is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.
2. Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law requires us to inform you of our intention and obtain your permission prior to contacting your doctor. I agree that the organisation reserves the right to require me to undergo a medical examination. In addition, I agree that this information will be retained in my personnel file during employment and for up to six years thereafter and understand that information will be processed in accordance with the Data Protection Act.
3. I agree that should I be successful in this application, I will, if required, apply to the Disclosure & Barring Service/Disclosure Scotland for a Disclosure Barring Certificate. I understand that should I fail to do so, or should the disclosure not be to the satisfaction of the company any offer of employment may be withdrawn or my employment terminated.
4. I understand that if I am appointed as a member of staff, I will undertake training courses which Paul’s Place determine as necessary and will not undertake tasks for which I have not received appropriate training. As an employee, I will undertake to be responsible for myself, whilst supporting the needs of the people I am assisting.

 Signed………………………………………………………………………….. Date………………………………………

Paul’s Place is an equal opportunities employer and we promote equality, diversity and anti‑discriminatory practice across our service.