

APPLICATION FORM



Please answer all the following questions fully, mark N/A where a question does not apply and include any additional information on a separate sheet if necessary.

Position Details

Position appl	ied for?						
Able to work	? (Delete where ap	plicable)					
	Single Runs	Double Ups	Sits	Nights	Live-in	Weekends	
sonal Informatio	on						
Surname					Title		
Month & Yea	r of any name chan	ges					
Forename(s)							
Previous nan	ne (s)						
Address							
Post code		Month & `	Year move	d into curr	ent addres	s	
Home teleph	one no			Mobile	No		
E-mail addre	SS						
Do you have	a full UK driving lice	ence? YES /	' NO				
Do you have	a valid passport?	YES,	/ NO				
Do you requi	re a permit to work	in the UK? YES ,	/ NO				
What is your	immigration status	? e.g. British citize	en/Indefin	ite leave			
If applicable	what Year did you a	rrive in the U.K?					
Country of bi	rth	Dict	rict of birth	_			

Employment History: Please tell us details of employment you have held in the past 10 years & explain gaps.

Date from	Date to	Company Name and address	Position & brief outline of the role	Reason leaving	for

Qualifications: For Example: GCSE's, NVQ's, GNVQ's, Graduate, Post graduate courses etc.

Date from:	Date to:	Subject taken/training course attended:	Awarded by:	Grade/Pin
				Number:

Short Training Courses: For example: Moving & Handling, First Aid, Food Hygiene, and Adult Protection

Course Title:	Date Achieved:

Additional Information: Please provide details of why you feel you are suitable for this role:

Retention: Staff retention is very important to us, please help us by completing this short section below:

3 reasons why you are changing your employment:	3 reasons why you would like to work with Plan-it Homecare:

References:

Please supply 2 work related referees, one being your current or most recent employer.

1. Current/most recent employer				
Name:				
Position:				
Address:				
Telephone Number:	_Fax Number:			
E-mail address:				
2. Other referee				
Name:				
Position:				
Address:				
Telephone Number:	_Fax Number:			
E-mail address:				

Data Protection:

In accordance with Data Protection Act 1998, you should be aware that personal details submitted with this application form will be used only for selection and interview procedures and employment records if the applicant is successful.

Declaration: Please read this carefully before signing the application form.

I confirm that the information that I have provided on this form is correct to the best of my knowledge. Please ensure that you have completed each part of the application form fully and that you have given full past employment details including addresses and contact details.

Signed:

Date:

Successful applicants will be contacted within 48 hours of interview appointment.