

# **Application Form**

Please return form to: Bethshan Nursing Home, Heol Treowen, Newtown, Powys, SY16 1JA or email to: admin@bethshan.uk

Application for the post of

Where did you see this job advertised?

Personal Details					
Title: Mr/Mrs/Miss/Ms (required for DBC check)		Home Address			
Surname (block capitals)					
Forenames (block capitals)					
Date of birth					
UK National Insurance number	-	Postcode			
Home telephone number		Work tel. number (if we may contact you there)			
Mobile telephone number					
Do you speak Welsh? Fluently,	/A little/Not at all	Languages spoken in addition to English			
Are you a United Kingdom (UK	) citizen? If not, plea	se give	details of your immigration st	atus	
Yes No					
Education & Profession	al Qualifications	3			
Please list all relevant courses undertaken and/or qualifications obtained. Please also include subjects currently being studied. Qualifications may be subject to a satisfactory check.				clude subjects	
Subject/Qualification	Place of study		Grade/result	Year obtained	

## **Relevant Training Courses Attended**

Please list all relevant training courses that you have attended or are currently undertaking, together with the date completed or to be completed by.						
Course title	Training	g provider	Dur	ation	Year	completed
	+					
Membership of Professional Bodies						
Please provide details reg be subject to a satisfactor	_	evant profession	onal regis	trations or membersh	ips. Th	is information will
I do not have the re	levant UK	c professional r	egistratio	on status		
I have current UK p	rofessiona	al registration s	status rel	evant for this post		
UK professional reg	istration r	required and a <sub>l</sub>	pplied for			
UK professional reg	istration i	required but no	ot yet app	olied for		
I am a student						
Not required for thi	is post					
If professional registration	n is not re	quired, then go	to <b>Empl</b>	oyment History		
If you have answered 'I hat the relevant details below		it UK professio	nal regist	ration relevant for this	s posť	then please enter
Professional body		Type of regist	tration	Membership/Registr number	ation	Expiry/renewal date
Employment History	y 					
Please record below the details of your full employment history beginning with your current or most recent first. If required, please provide additional information regarding your employment history within the 'Supporting Information' section.						
Current Employer						
Employer name						
Address						
Type of business			Tele	phone number		
Your job title			1			
Start date (MM/YYYY)			End	date (MM/YYYY)		
Grade				ry/hourly rate		
Reporting to (job title)		Period of notice				

Reason for leaving (if applicable)				
Brief description of your duties and responsibilities				
Previous Employer 1				
Employer name				
Address				
Type of business	Telephone			
Your job title				
Start date (MM/YYYY)	End date (MM/YYYY)			
Grade	Salary/hourly rate			
Reporting to (job title)				
Brief description of your dutie	es and responsibilities and reason for leaving			
Previous Employer 2				
Employer name				
Address				
Type of business	Telephone			
Your job title				
Start date (MM/YYYY)	End date (MM/YYYY)			
Grade	Salary/hourly rate			
Reporting to (job title)				
Brief description of your duties and responsibilities and reason for leaving				

Duovious Employer 2	
Previous Employer 3	
Employer name	
Address	
Type of business	Telephone
Your job title	
Start date (MM/YYYY)	End date (MM/YYYY)
Grade	Salary/hourly rate
Reporting to (job title)	
	nd responsibilities and reason for leaving
	nd responsibilities and reason for leaving
Brief description of your duties a	nd responsibilities and reason for leaving
Brief description of your duties a	nd responsibilities and reason for leaving
Previous Employer 4 Employer name	Telephone
Previous Employer 4 Employer name Address	
Previous Employer 4 Employer name Address Type of business	
Previous Employer 4 Employer name Address Type of business Your job title	Telephone
Previous Employer 4 Employer name Address Type of business Your job title Start date (MM/YYYY)	Telephone  End date (MM/YYYY)

If necessary, please add additional employers/information on a separate sheet

Employment Gaps					
If you have any gaps within your employment history, please state the reasons for the gaps below.					
Supporting Information					
Please indicate your reasons for applying and take the opportunity to highlight your particular talents and strengths (what you feel you can personally offer – what is unique to you – what sets you apart from your peers).  Please include skills, knowledge, experience, voluntary activities etc not included elsewhere in					
your application. Continue on a separate sheet if	neces	ssary.			
Additional personal information					
Preferred employment type Full time/part tin					
(please circle as appropriate)   Day shifts/Night	shifts				
Disabilities					
Under the Equality Act 2010 the definition of a di					
impairment that has a 'substantial' and 'long term' adverse effect on your ability to carry out normal day to day activities.					
According to the definition of Yes No					
disability do you consider		sclose this information			
yourself to have a disability?	1 (0 (1)	sclose this information			
Please identify the category which applies to you experience more than one type of impairment; ir		· · · · · · · · · · · · · · · · · · ·			
none of the categories apply, please mark 'Other		in case you may mulcate more than one. If			
Physical impairment		Learning disability/difficulty			
1 1 1		Learning disability/difficulty			
Sensory impairment		Long-standing illness			

### References

Please provide the names and full contact details of your referees

- References must cover a 3-year period of continuous employment, training or education. Your referees will need to confirm this. They may need to comment on your skills, personal qualities and suitability for the post.
- · Your referee could be an HR department, line manager or someone in a position of responsibility
- You must provide a valid work email address for each referee unless the email being provided is covering a gap in work history or the employer no longer exists, and the referee being used is a personal/character reference in which case a personal email address will suffice.
- If you are a student or trainee your referees should include a teacher/tutor at your school/college/university.

Please ask for advice if you are struggling for referees.

#### Referee 1

Name of referee

How they know you (please circle as appropriate)	Current employer/previous employer/school, college, university, higher education/personal character/other (give details)
Organisation they work for	
Referee's job title	
Referee's address and postcode	
Telephone no.	
E-mail address	
Period this reference covers	From (MM/YYYY) To (MM/YYYY)
Can the referee be contacted prior to interview?	Yes No
Referee 2	
Name of referee	
How they know you (please	Current employer/previous employer/school, college, university,
circle as appropriate)	higher education/personal character/other (give details)
Organisation they work for	
Referee's job title	
Referee job title	
Referee's address and postcode	
Telephone no.	
E-mail address	
Period this reference covers	From (MM/YYYY) To (MM/YYYY)
Can the referee be contacted prior to interview?	Yes No

#### **Rehabilitation of Offenders**

The organisation will treat any information disclosed in this section in the strictest confidence.

#### **REHABILITATION OF OFFENDERS ACT 1974**

Have you any criminal convictions which are not yet 'spent' under the Act? Yes/No

#### **EXEMPTION ORDER 1975**

This post carries an exemption from the Rehabilitation of Offenders Act, and you are therefore required to give details of all previous convictions.

Have you ever had any criminal convictions? Yes/No

You will be required to give details of criminal convictions if you are short-listed for interview

#### Declaration

I declare that the information contained in this form is true and complete.

I consent to the use of all this information for considering my application, and I understand that:

- it will be treated confidentially at all times according to our Privacy Policy (available on request);
- if I am successful it will form part of my personnel records;
- if I am unsuccessful the information will be destroyed after six months unless I ask for it to be retained for future vacancies;
- if it is subsequently discovered that any statement is false or misleading, Bethshan has the right to dismiss me from my employment. I also understand that canvassing will disqualify me, and any offer of the post is subject to satisfactory medical examination.

Signature of applicant	Date
------------------------	------

If your application is successful you may be required to provide documentary evidence of certain details given in this application.