

Please complete all sections in full. For printed copies please complete in BLACK ink as it may be necessary to photocopy your application.

Please return printed applications to:

HR Department, **ellenor** Gravesend, Coldharbour Road, Gravesend, Kent, DA11 7HQ

Please state where you saw this position advertised:

Particulars of the post applied for

Post title and reference no.

Hours

Personal details

Surname

Forenames

Previous surname (if relevant to references)

Address

Postcode

Telephone (Home)

Telephone (Work)

Mobile

Email

National Insurance Number

Professional Registration No.
(i.e GMC.NMC etc)

Disclosure and barring service (DBS) check

The post you are applying for may be subject to an enhanced DBS check.

Rehabilitation of Offenders Act 1974

This post is exempt from the provisions of the Rehabilitation of Offenders Act 1974. Applicants are therefore not entitled to withhold information about certain convictions. The amendments to the Exceptions Order 1975 (2013) provide that certain convictions are protected and are not subject to disclosure to employers and can not be taken into account. Guidance can be found on the Disclosure and Barring Service website. <https://www.gov.uk/government/publications/dbs-list-of-offences-that-will-never-be-filtered-from-a-criminal-record-check>

Do you have any convictions, cautions, reprimands or final warnings that are not "protected" as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013) by SI2013 1998.

Yes

No

If you have answered 'yes' to the above, please give details below:

DBS declaration

I declare that:

- I am not currently the subject of any police investigation and/or prosecution in the UK or in any other country.
- I have never been convicted of any criminal offence, received a police caution, reprimand or a criminal conviction in the UK or any other country, that I am required by law to disclose.
- I am not currently the subject of any investigation or proceedings by any body having regulatory functions in relation to health/social care professionals in the UK or any other country.
- I have never been disqualified from the practise of a profession or required to practise it subject to specific limitations following a fitness to practise investigation by a regulatory body in the UK or any other country.

Signature of Applicant:

Date:

Current/most recent employment

Name and address of current/most recent employer

Postcode

Tel No.

Your job title

Current/finishing salary (£)

Dates of employment

From

To

Reason for leaving

Notice period required

Outline of your present/most recent responsibilities

Employment history

Starting with the most recent, please give details for the last 10 years of any paid employment and/or volunteering activities not detailed above, including details of gaps in employment.

Name and address of organisation/company:

Position held, plus a brief description of duties:

Date from: (month/year)

Date to: (month/year)

Reason for leaving:

Education

School/College	Subject	Dates	Qualification	Grade(s)
----------------	---------	-------	---------------	----------

Further education

College/University	Courses, Degrees, Diplomas	Dates	Result/Grades
--------------------	----------------------------	-------	---------------

Professional qualifications and membership of professional bodies

Qualification	Training/Professional Body	Registration No.	Expiry
---------------	----------------------------	------------------	--------

Other relevant training courses

Course Title	Training Body	Dates	Result/Grades
--------------	---------------	-------	---------------

Do you own a full current driving licence? Yes No

Do you own/have access to a car? Yes No

Eligibility to work in the UK

(You will be asked to provide evidence)

Are there any restrictions to your residence in the UK that might affect your right to take up employment in the UK? Yes No

If you are successful in your application for employment, would you require permission to work in the UK? Yes No

Supporting statement

Please outline your reasons for applying for this post at **ellenor**. Include details of the skills, knowledge and any relevant experience and training you feel you have which would mean you may be successful in the role. Please refer to the job description and person specification and include any other information you consider relevant. CVs will not be considered.

References

Please provide the names and contact details of two employer referees. **One must be your present or most recent employer** or your school/college if you are a student. They should be able to provide information relating to your experience and qualifications for this position.

Friends, relatives or work colleagues are not acceptable as referees.

Name and address	Post code	Email
	Telephone	Capacity in which known to you

Name and address	Post code	Email
	Telephone	Capacity in which known to you

References will usually only be sought after an offer of appointment has been made and your permission has been given.

What activities outside work interest you? (State any positions held you consider relevant.)

Declaration

Please read the following information carefully before signing and submitting your application.

1. I confirm that the information included in this application is complete and correct and that any untrue, misleading or withheld information will give **ellenor** the right to reject my application, to withdraw any offer of employment or, if employed, to effect instant dismissal without notice.
2. I acknowledge that my employment with **ellenor** is subject to satisfactory references, health check and, where appropriate, a DBS check.
3. I consent to **ellenor** processing my personal data, as well as my sensitive personal data, given here (and on the Equal Opportunities Monitoring Form for the purposes of Equal Opportunities Monitoring) for purpose of my employment, for administrative and for the purpose of complying with applicable laws, regulations and procedures.

Signature of Applicant:

Date:

Please return printed applications to: HR Department, **ellenor** Gravesend, Coldharbour Road, Gravesend, Kent, DA11 7HQ

If you have not heard from us within two weeks of the closing date, your application has not been successful.

We regret it is not possible for us to reply to everyone personally.

Confidential**Equal opportunities monitoring form**

In accordance with our Equal Opportunities Policy, we monitor job applications to ensure that we provide equal opportunities to any job applicant and make sure that discrimination does not occur because of race, sex, sexual orientation, gender reassignment, religion or belief, marital or civil partnership status, age, disability, pregnancy and maternity. So that we can assess the success of this policy, we have set up a system of monitoring all job applicants. We would be grateful if you would complete the questions on this monitoring form. We have asked for your name in order to enable us to monitor applications at the shortlisting and appointment stage. All information supplied will be treated in confidence and will not be seen by any staff directly involved in the appointment. The monitoring form will be detached from the application form, stored separately and used solely to provide statistics for monitoring purposes. The information you provide will be stored either on paper records or a computer system in accordance with the Data Protection Act 1998 and will be used solely to monitor the diversity of **ellenor's** recruitment regarding equal opportunities issues.

The Equality Act 2010 defines disability as a 'physical or mental impairment which has a substantial and long term adverse effect on a person's ability to carry out normal day to day activities.' Long term in this context means likely to last longer than 12 months or likely to recur.

Do you consider yourself to have a disability as defined by the Equality Act? Yes No

If yes please give details:

Do you have any particular requirements regarding interview or any other selection arrangements? Yes No

If yes please give details:

Once an appointment has been made, the data given on this form will be stored on computer in an anonymised format and the form will then be destroyed.

Name

Post title

Date of birth

Marital status

Married

Single

Other

Prefer not to say

Nationality

Ethnic Origin

Ethnic origin categories are not about nationality, place of birth or citizenship. They are about the group to which you as an individual perceive you belong. Please indicate your ethnic origin by ticking the appropriate box.

White

British

Irish

Other white background

Please specify

Asian

Indian

Pakistani

Bangladeshi

British

Other Asian background

Please specify

Mixed

White & Black Caribbean

White & Black African

White & Black British

White & Asian

Other mixed background

Please specify

Eastern Asian

Chinese

Japanese

Black

Caribbean

African

British

Other black background

Please specify

Other ethnic group

Please specify

Prefer not to say

Sexual orientation

Heterosexual

Homosexual

Bisexual

Transexual

Prefer not to say

Gender

Male

Female

Other

Prefer not to say

Religion

Christian

Jewish

Sikh

Muslim

Hindu

Buddhist

Rastafarian

None

Other religion

Please specify

Prefer not to say