APPLICATION FORM FOR EMPLOYMENT



Please contact us if you need this application form in an alternative format or if you need any adjustments if you are asked to attend an interview.

Important: PLEASE WRITE CLEARLY IN BLACK INK

PERSONAL DETAILS	
Surname	Daytime (if convenient)
Title (Mr/Mrs/Miss/Ms/Dr)	Mobile no
First name(s)	Email
Home address	
	Do you possess a current, clean driving licence?
	Yes No No
Postcode	Please give details of any penalty points and reasons:
Telephone no	
POST INFORMATION Post applied for Ref	Yes No No
	If Yes, please give details?
Location	
Have you ever applied for a post with Abbeyfield before?	
Yes No	
	Please return your completed application form to:

EMPLOYMENT HISTORY

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Current/most recent employer's name & address	Position held & main duties	Start	Finish	Reason for leaving
Salary (£)		Notice	period	

Please provide details of all other employment, in sequence with the most recent first.

Previous employer's name & address	Position held	Start	Finish	Reason for leaving



EDUCATION / TRAINING

Please give details of your education (schools, colleges, higher education) and qualifications obtained. Please give details of any professional, specialist or job-related courses attended (with dates), certificates, obtained and any membership of professional bodies.

Establishmer	nt Subjects	Start	Finish	Result/Grade

STATEMENT IN SUPPORT OF YOUR APPLICATION

Please tell us why you are a suitable candidate for this role, highlighting your key achievements and any other relevant information that supports your application. Please continue on a separate sheet if necessary.



REFERENCES

Please provide us with details of 3 referees below.

Present/Last Employer

Name	Rehabilitation of Offenders Act 1974.
Address	Have you ever had any cautions/convictions?
	Yes No
Postcode	Date of offence/offences. Give details.
Occupation	
Tel no	
Previous Employer	Doculty Abboyfield carries out Disclosure and Parries
Name	Result: Abbeyfield carries out Disclosure and Barring Service (DBS) checks on all successful candidates.
Address	
Postcode	
Occupation	
Tel no	fully and truthfully and understand that false or misleading information will lead to my
Personal Reference	disqualification. Under the Data Protection Act 1998 I understand that personal information about
Name	me may be held
Address	on or verified by computer for personnel/employee administration purposes including analysis for
Occupation	management purposes and statutory returns.
Tel no.	Candidate signature
	Date

CONVICTIONS

Please enter below details of conviction for any

offence or any bind-overs imposed by any court.

offences or formal cautions by police for any

You must include spent convictions under the

DIVERSITY AND EQUALITY STATEMENT

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Abbeyfield is committed to an Equal Opportunities Policy in employment and will assess for jobs without regard to gender, age, race, colour, disability, sexual orientation, nationality, ethnic or national origin or marital status.

Please fill in this form as fully as possible so that we can monitor the implementation of our Equal Opportunities Policy.

The answers you provide in this section will be treated in the strictest confidence and will only be used for statistical monitoring. This section will be detached from the application form before the shortlisting and interview process begins.

PLEASE TICK THE APPROPRIATE BOX	XES			
Gender	Marital status			
	☐ Married/Civil Partnership	☐ Other		
Which Age group do you belong to? 16-25 □ 26-35 □ 36-45 □ 46-55 □	〕 56-65 □ 65+ □			
I would describe my ethnic origin as:				
Please state				
Do you consider yourself to have a disabilit	y?			
Yes □ No □				
Do you have a disability as defined by the D	Disability Discrimination Act?			
Yes □ No □ Don't Know	П			