**Application for Employment**

Alltogether Care Services Alltogether Care Services

Head Office 29 Milngavie Road

Clydebank Business Park Bearsden

Spectrum House, East Wing Glasgow G61 2DW

1A North Avenue Clydebank

G81 1DR

Tel: 0141 952 9883 Tel: 0141 237 7877

**PRIVATE AND CONFIDENTIAL**

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| **Position Applied For:** |  | **Reference:** |  |
| **Where Did You Hear about This Vacancy?** |  |
| **Please Return Form To:** | recruitment@atcservices.co.uk |

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| **Title:** |  | **Surname:** |  | **Forename:** |  |

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| **Address:** |  |
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|  | **Postcode:** |  |
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| **Contact Number(s):** | **Home:** |  |
| **Mobile:** |  |
| **E-Mail:** |  |

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| **Do you hold a current valid driving licence?:** | **Yes** |  | **No** |  | **Do you have the use of a car or other means of transport?** | **Yes** |  | **No** |  |
| **What area or distance are you willing to travel to?** |  |

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| **EDUCATION AND TRAINING** |
| **Schools/Colleges/Universities** | **Qualifications Gained** | **Date(s)** |
| **From (Month/Year)** | **To (Month/Year)** |
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| **Other Training Provider** | **Subject** | **Date(s)** |
| **From (Month/Year)** | **To (Month/Year)** |
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| **MEMBERSHIP OF PROFESSIONAL BODIES** |
| **Name of Professional Body:** |  |
| **Registration Number/Level of Membership:** |  |

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| **EMPLOYMENT HISTORY**  |
| **Please complete in full using a separate sheet if necessary, starting with your most recent and if applicable, last 10 years employment (give reasons for any gaps in employment)** |
| **Name and Address of Current/Most Recent Employer** | **Job Title/Key Duties and Responsibilities** |
|  |  |
| **Dates:** | **From (Month/Year):** |  | **To (Month/Year):** |  |
| **Reason for Leaving/Wanting to Leave:** |  |
| **Salary/Rate of Pay on Leaving:** |  |
| **Notice Required:** |  |

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| **Name and Address of Employer** | **Job Title** | **Date(s)** | **Reason for Leaving** |
| **From (Month)** | **To (Year)** |
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| **OTHER EMPLOYMENT** |
| Please detail any other employment you would still continue with if you were successful in obtaining this position: |
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| **LEISURE** |
| Please note here your leisure interests, sports and hobbies etc. |
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| **RELATIONSHIPS** |
| Please declare here any family or close relationships to existing employees of **Alltogether Care Services** |
| Name: |  |
| Relationship: |  |

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| **REFERENCES** |
| Please provide details of a minimum of 2 referees (3 if possible) who can provide information relating to your ability and experience for this position, one of whom **MUST** be your most recent employer. Employment references must come from the **Manager** of the organisation in which you were employed, not from a colleague. If you are a student, please given an **Academic** referee. If you are applying for a post which requires unsupervised access to vulnerable adults, we reserve the right to approach any past employer for a reference. |
| **Employment Reference 1** | **Current Employment** |
| **Name:** |  |
| **Position:** |  |
| **Organisation:** |  |
| **Address:** |  |
|  | **Postcode:** |  |
| **Contact Number:** |  |
| **E-Mail Address:** |  |
| **E-Mail Type:** | **Business:** |  | **Home:** |  |

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| **Employment Reference 2** | **Most Recent Previous Employment** |
| **Name:** |  |
| **Position:** |  |
| **Organisation:** |  |
| **Address:** |  |
|  | **Postcode:** |  |
| **Contact Number:** |  |
| **E-Mail Address:** |  |
| **E-Mail Type:** | **Business:** |  | **Home:** |  |

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| **Character/Academic Reference 3** | **Character (✓)** **10 years +** |  | **Academic (✓)** |  |
| **Name:** |  |
| **Position:** |  |
| **Organisation:** |  |
| **Address:** |  |
|  | **Postcode:** |  |
| **Contact Number:** |  |
| **E-Mail Address:** |  |
| **E-Mail Type:** | **Business:** |  | **Home:** |  |

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| **DETAILS OF ANY DISCIPLINARY OFFENCES** |
| If you have previously worked with vulnerable adults, either paid or voluntarily, you are advised that your employer will be asked if you have currently, or have ever, had any disciplinary warnings issued to you regarding the safety and welfare of service users. If you have had such a warning, including this which have expired, please given details below: |
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| **GENERAL COMMENTS** |
| Please detail here your reasons for applying for this post, your main achievements to date and the qualities |
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| **CAUTIONS, REHABILITATIONS AND CRIMINAL, RECORDS** |
| Because of the nature of the work for which you are applying, this post is exempt from the provisions of the Rehabilitation of Offenders Act 1974 (Exclusions and Exceptions) (Scotland) Order 2003 (as amended) (in Scotland) and the Rehabilitation of Offenders Act 1974 (Exclusions and Exceptions) (in England), which means that convictions that are spent under the terms of the Rehabilitation of Offenders Act 1974 must be disclosed, and will be taken into account in deciding whether to make an appointment. Any information will be completely confidential and will be considered only in relation to this application. If we become aware of any convictions which you have failed to disclose we reserve the right to withdraw and offer of employment or to terminate employment. In addition, you are required to submit to a criminal record check. Any standard or enhanced disclosure made by the CRB/Disclosure Scotland will remain strictly confidential. Declaring previous convictions will not necessarily debar you from working with Alltogether Care Services. This will depend on the nature of the position, together with the circumstances and background of your offences. |
| Have you ever been convicted in a Court of Law and/or cautioned in respect of any offence? | **Yes** |  | **No** |  |
| Do you have any pending cautions, convictions or investigations by Police or a professional body? | **Yes** |  | **No** |  |
| If **YES**, please give details: |
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| **ABSENCE (please declare all absences in the last 12 months and the reasons why)** |
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| **DECLARATION** |
| * I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered
* I confirm that the information provided by me in the enclosed Health Questionnaire is complete and correct and that the organisation reserves the right to request that I undergo a medical examination and that they will obtain my express permission before doing so; I accept that this information will be retained in my personnel file and will be processed in accordance with the Data Protection Act
* I confirm that I am not subject to any sanctions imposed by a regulatory body such as SSSC, GSCC, NMC, ISA, PVG
* I accept that my previous employers may be approached for references and unless I have stated otherwise, this may be prior to interview; I also agree that I will, if required, apply to the Criminal Records Bureau/Disclosure Scotland for a standard or enhanced (as appropriate) Disclosure; I understand that if I fail to do so, or if the disclosure or references are not satisfactory, any offer of employment may be withdrawn or my employment terminated.
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| **Signature of Applicant:** |  |
| **Date:** |  |