

Application Form

Personal Information

Title	Forename:	Surname:	
Address:	Telephone Numbers		Email address:
	Home:	Mobile:	

We are committed to ensuring that the organisation removes any unnecessary barriers to the employment of any individual. We recognise that in order to enable all individuals to compete on equal terms, some people may have additional requirements. If you are subsequently invited for an interview, are there any adjustments required to the recruitment process which would assist you? If so, please give details.

Employment

It is essential you provide full employment history since leaving education starting with your most recent employer and going back chronologically until the time you left education.

Any gaps in your employment history must be accounted for.

Name of Previous Employer(s)	Job Title	Dates (To/From)	Reasoning for leaving

Education & Qualifications

Types of Education, i.e., Secondary School/College/University. Please state actual establishment.	Qualifications Gained (State Level)	Grades	Date From	Date To

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References

One referee must be your present or most recent employer. Please note that references from partners or family members are not acceptable. Please be aware that we must contact your most current employer before an offer of employment can be made.

Please tick the box if you do not wish your employer to be contacted at this stage.

Professional		Professional/Personal	
Name:		Name:	
Position Held:		Position Held:	
Organisation Name:		Organisation Name:	
Address:		Address:	
Tel No:		Tel No:	
Email:		Email:	

Reference Checking Consent and Authorisation Form

I have applied for employment with Bloomsbury Home Care and have provided information about my previous employment. I authorise Bloomsbury Home Care to conduct a reference check with my present and/or previous employer(s).

I understand that reference information may include, but not be limited to, verbal and written inquiries or information about my employment performance, professional demeanor, rehire potential, dates of employment, salary, and employment history.

My signature below authorises my former or current employers and references to release information regarding my employment record with their organisations and to provide any additional information that may be necessary for my application for employment with Bloomsbury Home Care, whether the information is positive or negative. I knowingly and voluntarily release all former and current employers, references, and Bloomsbury Home Care from any and all liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications, and my suitability for employment with Bloomsbury Home Care.

This form may be photocopied or reproduced as a digital version, and these copies will be as effective as a release or consent as the original which I sign.

Print Name & Signature:	
Date:	

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DBS

I have applied for employment to a post which is exempted from the rehabilitation of Offenders Act (1974). I understand that this is a post which is subject to an enhanced Disclosure and Barring Service Disclosure. This means I must disclose details of all 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 SI 2013 1198. I hereby provide the following information in accordance with this.

The amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are 'protected' and are not subject to disclosure to employers, and cannot be taken into account.

Guidance and criteria on the filtering of these cautions and convictions can be found on the Disclosure and Barring Service website.

	Yes	No
Have you ever been disqualified from working with vulnerable people?		
Has your conduct in relation to vulnerable people ever been a cause for concern or investigation?		
Have you ever been convicted of a motoring offence?		
Have you ever been convicted of any other offence?		
Have you ever had a caution?		
Have you ever been involved with a police investigation?		

DBS Information

Maiden Name				
Middle Name				
Previous Surnames	Year from		Year to	
Date of birth				
Place of birth	Town		County	
NI number				
Passport number			Date of issue	
Driving licence number			Date of issue	

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Current address	Month & year from	Month & year to

Other addresses within last five years and give month and year from and to.

Additional address	Month & year from	Month & year to