

# Application for employment

Private & confidential



**Return this form to:** Recruitment, TLC Care and Support Ltd, The Colchester Centre, Hawkins Road, Colchester, Essex, CO2 8JX  
**Tel:** 01787 321311  
**Email:** recruitment@tlccarehomes.co.uk

Position applied for:

Location:

## Personal details

Title:

Surname:

Forename(s):

Address:

Postcode:

Email address:

NI No:

Telephone No. (please include code)

Home:

Mobile:

Current driving licence? (please tick)

Yes:

No:

Schools and qualifications gained:

College/University and qualifications gained:

Other training/Professional memberships:

Are there any restrictions on you taking up work in the UK? If YES please provide details:  
(i.e immigration, visa, hours etc)

Yes:

No:

## Personal statement

Please detail here your specific reasons for this application, your main achievements to date and the strengths you would bring to this post.

## Employment history

Please complete in full using a separate sheet if necessary, starting with your most recent employment and give reasons for any **gaps in employment**.

From - To	Name & Address of employer	Job Title & Duties	Salary on leaving	Reason for leaving

## References

Please provide details of two referees who can provide information relating to your competency in a caring role, one of whom must be your present or most recent employer (referees for qualified Nurses must be professionals). If you are a student, please give an academic referee.

1

Name:

Position:

Organisation:

Address:

Postcode:

Telephone No:

Email Address:

2

Name:

Position:

Organisation:

Address:

Postcode:

Telephone No:

Email Address:

May the company approach the above prior to interview?

Yes:

No:

May the company approach the above prior to interview?

Yes:

No:

## Cautions, rehabilitation and criminal records

Because of the nature of the work for which you are applying, this post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974, by virtue of the Exceptions Order 1975 as amended by the Exceptions (Amendment) Order 1986, 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.

In addition you are required to submit to a Disclosure & Barring Service check. Any standard or enhanced disclosure made by the DBS will remain strictly confidential.

Have you ever been convicted in a Court of Law and/or cautioned in respect of any offence?

Yes:

No:

If YES, please give details:

## Equal opportunities monitoring

TLC is committed to providing equality of opportunity for all and opposes all forms of unlawful or unfair discrimination on the grounds of race, sex, nationality, ethnic origin, marital status, age, sexuality, religious belief or disability. All information is confidential.

I would describe my ethnic group and sex as: (please tick one box for your ethnic group and one box for your sex)

A) White

English  Scottish  Welsh  Irish  Any other White background, please specify:

B) Mixed

White and Black Caribbean  White and Asian  White and Black African

Any other Mixed background, please specify:

C) Asian, Asian British, Asian English, Asian Scottish or Asian Welsh

Indian  Bangladeshi  Pakistani  Any other Asian background, please specify:

D) Black, Black British, Black English, Black Scottish or Black Welsh

Caribbean  African  Any other Black background, please specify:

E) Chinese, Chinese British, Chinese English, Chinese Scottish, Chinese Welsh or other Ethnic Group

Chinese  Any other background, please specify:

F) Sex

Male  Female

## Declaration care sector (Please read carefully before signing this application)

1) 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.

2) Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law requires us to inform you of our intention and obtain your permission prior to contacting your doctor. I agree that the organisation reserves the right to require me to undergo a medical examination. In addition, I agree that this information will be retained in my personnel file during employment and for up to six years thereafter and understand that information will be processed in accordance with GDPR.

3) I confirm that I give you permission to process your personal data for the use of TLC Care and Support Ltd. Your details will be kept on file following GDPR regulations should my application not be successful.

Signed:

Date: