185 Tadcaster Road, YORK, YO24 1GL

**APPLICATION FORM *- Confidential***

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| **Post applied for:** | **Post Reference:** |
| Surname: | Forenames: | Title: (Ms,Mrs,Miss,Mr,Other) |
| Previous Surnames: | Any Other Names Known By: | National Insurance Number: |
|  | Telephone/Contact Details: Daytime: Evening:Mobile: Email: |
| Permanent address:Post Code: | Present address (if different):Post Code: |
| PRESENT POST |
| Job title:Present salary & grade:Date appointed:Notice required: | Name and address of employer:Post code:Telephone no: |
| Reason for leaving present post: |
| **PREVIOUS EMPLOYMENT & GAPS IN EMPLOYMENT (most recent first)** |
| **Job Title** | **Name & Address of Employer** | **Dates of Appointment, Salary Level and Reason for Leaving/Gap** |
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|  How did you find out about this vacancy?: |

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| EDUCATION |
| School/Sixth Form/College | From | To | Details of qualifications gained |
|  |  |  |  |
| FURTHER/HIGHER EDUCATION/PROFESSIONAL TRAINING |
| College/University/Organisation | From | To | Details of qualifications gained |
|  |  |  |  |
| ANY OTHER COURSES/TRAINING |
| Course Title | Course Provider | Dates |
|  |  |  |
| PROFESSIONAL REGISTRATION |
| Applicants for medical, professional and nursing posts **must** state:Professional Registration Body (eg NMC, GMC, GSCC): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Type of Registration (eg Full, Limited, Provisional): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Registration Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Expiry Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| FURTHER INFORMATION |
| This is one of the most important parts of your application. Tell us why you are applying for the post and how your experience, skills, responsibilities and knowledge will enable you to do the job. Remember to match this to the Person Specification. (Add additional sheets if required) |
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| Do you have a clean, full and current driving licence? **Yes / No\***If **NO** to the above, please give detailsDo you own or have regular use of a vehicle? **Yes / No\***\* only answer these questions if driving and the use of a vehicle is a requirement of the post.**Permission to work in the UK**You will normally be able to work in the UK if you are in one of the following categories (see the [UK Borders Agency](http://www.ukba.homeoffice.gov.uk/workingintheuk/) website for more information):* You are a legal national of the UK or other country in the European Economic Area (EEA) or a Swiss national
* You are a dependent, husband, wife or civil partner of a UK or EEA national or a individual who has an existing right to work in the UK
* You have acquired indefinite leave to remain in the UK or have a UK Ancestry visa
* You have a valid student visa. This entitles you to work on a part-time basis for the annual equivalent of up to 20 hours per week until the expiry of your visa

**Do you have the right to live and work in the UK? Yes / No**Nationality …………………………………… |
| **Referees**Please give the names and addresses of two persons who would be prepared to give a reference on your behalf. One should be your present or most recent employer. Where possible we require employment references rather than those provided in a personal capacity. Neither should be a friend / relative.  |
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|  Name: Job title/capacity known: Company: Address: Post code: Telephone no.: Email:Can we take this reference up immediately?(i.e. prior to interview)? Yes / No | Name: Job title/capacity known: Company: Address: Post code: Telephone no.: Email:Can we take this reference up immediately?(i.e. prior to interview)? Yes / No |
| REHABILITATION OF OFFENDERS ACT 1974 |
| **St. Leonard’s Hospice aims to promote equality of opportunity for all with the right mix of talent, skills and potential.** Criminal records will be taken into account for recruitment purposes only when the conviction is relevant, and will not necessarily be a bar to obtaining a position. Successful candidates will be required to complete a confidential declaration detailing any criminal convictions, cautions, reprimands and final warnings and any other information that may have a bearing on their suitability for the post.As St. Leonard’s Hospice meets the requirements in respect of exempted questions under the Rehabilitation of Offenders Act 1974, applicants aged 18 years or over who are offered employment for certain posts will be subject to a check from the Disclosure & Barring Service (DBS) before the appointment is confirmed. Where appropriate this will include an enhanced check against the barred list for adults and children. This will include details of cautions, reprimands or final warnings, as well as convictions. We comply fully with the DBS Code of Practice. The Hospice will also request checks and make referrals under the Protection of Vulnerable Adults (POVA) and Protection of Children Schemes. |
| **DECLARATION** |
| I confirm the information I have given on this form and others connected with my application is to the best of my knowledge and belief, correct, complete and true. I understand that my application may be rejected or if I have been appointed that I may be dismissed for withholding relevant details or giving false information. **Signature of Applicant:…………………………………………………………. Date:……………………..** |