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| Head Office: 946 Warwick Road, Acocks Green, Birmingham, B27 6QG  Telephone: 0121 706 1332  Email: [johanna.irving@gracebridgecare.co.uk](mailto:johanna.irving@gracebridgecare.co.uk) / [helen.stokes@gracebridgecare.co.uk](mailto:helen.stokes@gracebridgecare.co.uk)  **Job Application Form**  **Please complete all sections on the form** |

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| 1. **Vacancy Details** | |
| **Job title:** |  |

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| 1. **Personal Details** | | | | |
| **First name(s):** |  | **Surname:** |  | |
| **Address & Postcode:** |  | | | |
| **Telephone number (day):** |  | **Telephone Number (eve):** |  | |
| **Email:** |  | | | |
| **Mobile:** |  | **Current driving licence:** |  | |
| **Please indicate if you are happy to receive correspondence via your email address,**  **e.g. invite to interview** | | | | Yes  No |

**Employment History: You must list all of your previous work experience, starting with your most recent job and including all positions held since you left education.**

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| 1. **Current Employment** | |
| **Job Title** |  |
| **Employer’s name** |  |
| **Address**  **Telephone Number** |  |
| **Date Started** |  |
| **Salary** |  |
| **Amount of notice required** |  |
| **Brief outline of duties** |  |
| **Reason for leaving** |  |

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| 1. **Previous Employment** | |
| **Job Title** |  |
| **Employer’s name** |  |
| **Address**  **Telephone Number** |  |
| **Employment dates (from/to)** |  |
| **Brief outline of duties** |  |
| **Reason for leaving** |  |
|  |  |
| **Job Title** |  |
| **Employer’s name** |  |
| **Address**  **Telephone Number** |  |
| **Employment dates (from/to)** |  |
| **Brief outline of duties** |  |
| **Reason for leaving** |  |
|  |  |
| **Job Title** |  |
| **Employer’s name** |  |
| **Address**  **Telephone Number** |  |
| **Employment dates (from/to)** |  |
| **Brief outline of duties** |  |
| **Reason for leaving** |  |
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| **Job Title** |  |
| **Employer’s name** |  |
| **Address**  **Telephone Number** |  |
| **Employment dates (from/to)** |  |
| **Brief outline of duties** |  |
| **Reason for leaving** |  |
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| **Job Title** |  |
| **Employer’s name** |  |
| **Address**  **Telephone Number** |  |
| **Employment dates (from/to)** |  |
| **Brief outline of duties** |  |
| **Reason for leaving** |  |
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| **Job Title** |  |
| **Employer’s name** |  |
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| **Employment dates (from/to)** |  |
| **Brief outline of duties** |  |
| **Reason for leaving** |  |
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| **Job Title** |  |
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| **Job Title** |  |
| **Employer’s name** |  |
| **Address**  **Telephone Number** |  |
| **Employment dates (from/to)** |  |
| **Brief outline of duties** |  |
| **Reason for leaving** |  |
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| **Job Title** |  |
| **Employer’s name** |  |
| **Address**  **Telephone Number** |  |
| **Employment dates (from/to)** |  |
| **Brief outline of duties** |  |
| **Reason for leaving** |  |
| **Please add additional boxes if needed** | |

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| 1. **Breaks in Employment History** | | |
| **Date From** | **Date to** | **Reason** |
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| 1. **Education** | | | |
| **Date** | **Institute** | **Qualification gained or pending** | **Grade(s) obtained** |
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| 1. **Ill Health Retirement/Dismissal** | |
| **Have you ever taken ill health retirement from a previous employer or been dismissed for some other reason?** | **YES/NO** |

**If you have worked in any role that involved direct contact with children, young people (under 18) or vulnerable adults,**

**you are required to provide a reference from each of these positions. Please Add additional boxes if needed**

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| 1. **References (Please give details of two referees. The first referee must be your current or most recent employer)** | | | | |
| **First name(s):** |  | **Surname:** |  | |
| **Address & Postcode:** |  | | | |
| **Telephone number:** |  | **Email:** |  | |
| **Job title:** |  | **Relationship to you:** |  | |
| **Please put a cross in the box if you do not wish us to take up a reference without your consent** | | | |  |
|  | | | | |
| **First name(s):** |  | **Surname:** |  | |
| **Address & Postcode:** |  | | | |
| **Telephone number:** |  | **Email:** |  | |
| **Job title:** |  | **Relationship to you:** |  | |
| **Please put a cross in the box if you do not wish us to take up a reference without your consent** | | | |  |
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| 1. **Training (Please list any courses which you have undertaken which are relevant to the job)** | | | |
| **Date** | **Training provider** | **Course title** | **Course duration** |
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| 1. **Membership of Professional Bodies** | | | |
| **Date** | **Name of organisation** | **Type of membership** | **Grade/Level** | |
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| 1. **Other information in support of your application**   In order for us to decide whether to call you for interview, it is essential that you provide us with sufficient details of any experience and skills which demonstrate how you meet the requirements of this job. Please continue on a separate sheet is necessary. You should ensure that any additional sheets are attached securely. |
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| 1. **Right to Work** | |
| Do you have the right to work in the UK?  Please note: original identification documents verifying your right to work in the UK will be requested, checked and a photocopy will be taken. If your application is successful and you commence employment the copy of your identification documents will be retained on files under the regulations governed by the Immigration, Asylum and Nationality Act. Right to work in the UK documentation will be fully checked for all applicants. All non-UK and non-EU applicants are required to apply for a Certificate of Sponsorship from Birmingham Children's Trust and must be approved by the UK Border Agency (UKBA) before any employment offer can be confirmed.’  Do you have the right to work in the UK? | **YES/NO** |

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| 1. **Driving Licence** | |
| Do you hold a current driving licence? Please indicate if you hold a current driving licence. | **YES/NO** |

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| 1. **General Questions** | |
| Are you related to a worker, service user, trustee or employee of the Company? | **YES/NO** |
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| Have you ever worked for the Company in any capacity in the past?  If so what was the reason for leaving? | **YES/NO** |
| Do you have any medical conditions, disabilities, or health needs that we should be aware of to ensure your safety and comfort during your participation? If yes, please provide details below or contact us directly.  *Your response will be kept confidential and used only for the purposes of making appropriate accommodations.* | **YES/NO** |

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| 1. **Arrangements for Interview** | |
| The Equality Act 2010 defines a person as having a disability if he/she has a physical or mental impairment which has a substantial and long-term adverse effect on his/her ability to carry out normal day to day activities.  Do you have a disability as defined above?  Please specify any arrangements which we can make for you if you are called for an interview and/or work-based exercise. | **YES/NO** |

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| 1. **Criminal Convictions / Cautions / Disqualified Persons / Investigations**   This company is committed to the welfare and safety of vulnerable adults and children. Criminal convictions are not necessarily a bar to employment, but the safety of vulnerable adults and children will be key to all decisions regarding the employment of staff or volunteers.  This position is exempt under the Rehabilitation of Offenders Act 1974, therefore you must disclose all previous convictions, cautions, bind over order, any road traffic offences, Court Martials, or any pending proceedings. A Criminal Records Bureau Disclosure will be required.  To assist with the implementation of this policy, all applicants are asked to complete the following questionnaire and provide written consent for checks to be completed. | |
| **Are you on the DBS Update Service?** | Yes  No |
| **DBS Certificate Number?** |  |
| **Issue Date** |  |
| 1. **Have you ever pleaded guilty, been convicted, or cautioned by a police officer, for any criminal offences?** | Yes  No |
| 1. **Have you ever been interviewed as a potential suspect or investigated in relation to matters that might have led to criminal proceedings?** | Yes  No |
| 1. **Have you been subject to, or interviewed, in relation to disciplinary matters or allegations against you, in any previous employment?** | Yes  No |
| 1. **Has your name been added to any of the following:**   **The DOH Consultancy List, now known as the Protection of Children Act List, The DFES List 99 or The Protection of Vulnerable Adults List.** | Yes  No |
| 1. **Have you ever been subject to, or party to, court proceedings, involving any social services authority or its equivalent, here or abroad, that has resulted in the removal of children or vulnerable adults from your care, or the imposition of a statutory supervision order?** | Yes  No |
| 1. **Have you ever been refused registration or cancelled from any official registers of the following:**   **Child-minders, Day Care Providers, Private Fostering, Registered Care Home or Children’s Home?** | Yes  No |
| **If any of the answers to any of these questions is YES, please give full details on a separate sheet**  You are reminded that knowingly withholding this information or failing to disclose subsequent information will lead to a disciplinary investigation or an application for employment not being approved. You should note that it is a criminal offence to knowingly apply for, offer to do, accept or do any work with children or vulnerable adults when prevented either by reason of disqualification order under the Criminal Justice and Court Services Act 2000 or by reason of inclusion in one of the Lists held by the Department of Health or the DfES. | |

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| 1. **Agreement to Disclosure** | |
| I hereby give consent to the company completing such checks as are necessary with records held by the Company and/or other agencies in order to verify the information provided above.  I further understand and agree that if, for whatever reason, my application is either refused or withdrawn, but information is revealed which leads the company to conclude that I may pose a risk to vulnerable adults and/or children, it will keep this information for an appropriate period.  I understand that the company may reveal this information to any other agency or company. I understand that, if practicable, I will be alerted prior to such a disclosure and be invited to comment.  If you take up employment it is necessary for you to inform the person with personnel responsibilities of any cautions, bind over orders or convictions you sustain during the subsequent course of your employment.  FAILURE TO DO SO WILL LEAD TO A DISCIPLINARY INVESTIGATION OR AN APPLICATION FOR EMPLOYMENT NOT BEING APPROVED.  Information collected as part of this recruitment procedure will be stored and processed in accordance with our Data Protection Privacy Policy. | |
| Signature: |  |
| Date: |  |
| Print Name: |  |