

***59 Tirgavil Road, Upperlands, Maghera. Co-L’Derry.BT46 5UW.***

***Telephone/Fax: 02879642238***

***Emails:chrisramrachia55@btinternet.com***

**EMPLOYMENT APPLICATION FORM**

**(Private and Confidential)**

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| **Post Title:** |
| **How did you hear of the Vacancy:** |
| **Interview date: Potential start date:** |
| **Surname: Title: Mr/Mrs/Ms/Miss:** |
| **Forename: Previous Surname:** |
| **Home address:** |
|  |
| **Post Code:** |
| **Telephone: Mobile:** |
| **N.I Number:** |
| **Next of Kin:** |
| **Address:** |
| **Post Code:** |
| **Telephone: Mobile:** |

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| **Do you have any physical or mental disabilities that may be relevant to this application? Yes □ No □** |
| **Overall state of health? Excellent □ Good □ Poor □** |
| **Would you be willing to have a medical if required? Yes □ No □** |

**EDUCATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of School**  **or Institution** | **Details of**  **Courses taken** | **Date**  **From** | **Date**  **To** | **Qualifications**  **Gained** |
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**QUALIFICATIONS**

***(Please list courses/studies undertaken during the last five years which may be relevant to post)***

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| Course Title | Brief description of the Course | Course Date |
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**EMPLOYMENT HISTORY FOR THE LAST 10 YEARS**

*(Most recent first, all gaps must be accounted for.)*

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| ***Employer*** | | ***Position held and main duties*** | | ***Date***  ***From*** | | ***Date***  ***To*** | ***Reason for leaving*** | |
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**REFEREES 1**

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| **Please give the names of two recent professional referees (not relatives), stating their position. One referee must be your current/last employer.** |
| **Name: Position Held:** |
| **Company Name:** |
| **Address:** |
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| **Post Code:** |
| **Telephone:** |
| **Start Date:** |
| **Leaving Date:** |

**REFEREES 2**

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| **Name: Position Held:** |
| **Company Name:** |
| **Address:** |
|  |
| **Post Code:** |
| **Start Date:** |
| **Leaving Date:** |
| **CONSENT TO A 'POVA (NI) CHECK** |
| Do you have any prosecutions pending? Y**es / No** *(if yes, please give details)* |
| I understand that a POVA (NI) Service check must be carried out before an offer of appointment can be confirmed. This has been explained to me and I am aware that spent convictions may be disclosed. I declare that the information I have given is accurate and I consent to the check being made. I give permission for Benbradagh Care Home to forward my POVA application form to Ravenhill Private Nursing Home for verification under the access NI umbrella body. |
| **Signature Date:** |
| **Name Position applied for:** |
| The European Union has laid down guidelines for all workers, governing the length of the maximum working week which is safe to work. The current limit is 48 hours per week. Because you are under no obligation to accept work offered you will never be compelled to work more than 48 hours per week but you may choose to do so. If you understand please tick and sign the relevant line. |
| I DO NOT wish to work more than 48 hours per week □ |
| I DO wish to work more than 48 hours per week □ |
| **DECLARATION**  I declare that I have answered the above questions honestly and fully. I am not aware of any physical or mental disability which will, or may affect my working capacity. I realise that any false or incomplete statement on my part will render me liable to disciplinary action or dismissal. |
| Signed: Date |

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