

Please complete and return to:



Job Application Form

APPLICATION FOR THE POST OF:

Please state how you became aware of the post

Personal details <small>(Please complete in block letters)</small>
Surname:
First Names:
Address:
Postcode:

Do you require a work permit? YES NO

Do you hold a current driving licence? YES NO

Are you a car owner? YES NO

National Insurance No.

Nursing/Health Professions Council registration details

Body (NMC/HPC):

Pin/Registration No.:

Expiry date:

Membership of professional body

Body: Reg No.:

Telephone number (home):

Telephone number (mobile):

Telephone number (work):

Education & qualifications

Schools, Colleges etc. attended from age 11	Qualifications, Certificates, Diplomas, Degrees etc. obtained

Training Courses attended with Dates (Please give details of any short/refresher courses you have attended that are relevant to the post for which you are applying):

Have you ever been (or are you currently) the subject of any police investigation or conviction in this or any other country? YES NO

Have you ever been (or are you currently) the subject of fitness to practice proceedings by any licensing or regulatory body? YES NO

Do you have any knowledge of foreign languages? YES NO

If 'YES' please state Language(s) & Fluency:

Present or most recent employer

Present or most recent employer

Address:

Post Held:

Date of appointment:

Leaving date:

Period of notice required:

Salary:

Please give a brief description of your current duties and responsibilities:

Reason for leaving or wanting to leave:

Previous employment (most recent first) Please account for any periods when you were not in employment

From	To	Employer's name and address	Position	Responsibilities and reason for leaving

Please complete this sheet in your own handwriting using it to demonstrate your skills, knowledge and experience relevant to the post.

Date received in Personnel Dept.: ____ / ____ / ____

Date added to database: ____ / ____ / ____



EQUALITY OPPORTUNITY RECRUITMENT MONITORING FORM – Confidential

Aspen Healthcare Limited is committed to promoting equality, diversity and an inclusive and supportive environment for all prospective employees.

In particular, Aspen Healthcare Limited will seek to ensure that people are treated equitably regardless of their gender, race, colour, ethnic or national origins, age disability, socio-economic background, religious or political beliefs and affiliations, marital status, family responsibilities, sexual orientation or other inappropriate distinction.

In order to monitor the impact of this policy it is necessary to collect information from all employees and job applicants on the key characteristics, which relate to equality and diversity in employment.

The information collected will be used for monitoring purposes and to update our confidential recruitment and employee database under the terms of the Data Protection Act 1998. The information will be used to form baseline statistical reports to assess the impact of our policy and promote equality of opportunity.

Section 1: PERSONAL DETAILS (Please complete in block letters)

Surname:

Date of birth:

____ / ____ / ____

First Names:

Post applied for:

- Do you consider yourself to have a disability?

Yes No

If 'yes' what is your disability?

- The Act defines a disability as a "A physical or mental impairment which has a substantial long term and adverse effect on a person's ability to carry out normal day-to-day activities".

Section 2: NATIONALITY

Please specify:

Section 3: ETHNICITY – What is your ethnic background?

You are asked to classify yourself in the category, which you feel most nearly describes your origin. If none of the specific groups are suitable please mark the relevant 'Other' and specify your ethnicity:

A. White

British

Irish

Other White background
(please specify)

B. Mixed

White and Black Caribbean

White and Black African

White and Asian

Other Mixed background
(please specify)

Section 3: ETHNICITY – What is your ethnic background? (Continued)

C. Asian or Asian British	Indian	<input type="checkbox"/>
	Pakistani	<input type="checkbox"/>
	Bangladeshi	<input type="checkbox"/>
	Other Asian background <i>(please specify)</i>	<input type="text"/>
D. Black or Black British	Caribbean	<input type="checkbox"/>
	African	<input type="checkbox"/>
	Other Black background <i>(please specify)</i>	<input type="text"/>
E. Chinese or other ethnic group	Chinese	<input type="checkbox"/>
	Other Ethnic group <i>(please specify)</i>	<input type="text"/>

Section 4: RELIGION

What is your religious belief?	Christian	<input type="checkbox"/>
	Buddhist	<input type="checkbox"/>
	Hindu	<input type="checkbox"/>
	Jewish	<input type="checkbox"/>
	Muslim	<input type="checkbox"/>
	Sikh	<input type="checkbox"/>
	Other religion <i>(please specify)</i>	<input type="text"/>

Section 5: GENDER

What is your sex?	Female	<input type="checkbox"/>
	Male	<input type="checkbox"/>

Section 6: SEXUAL ORIENTATION

What is your sexual orientation?	Lesbian or Gay	<input type="checkbox"/>
	Bisexual	<input type="checkbox"/>
	Heterosexual	<input type="checkbox"/>
	Prefer not to say	<input type="checkbox"/>

Section 7: AGE GROUP

What is your age group?	Under 18	<input type="checkbox"/>
	18 - 29	<input type="checkbox"/>
	30 - 39	<input type="checkbox"/>
	40 - 49	<input type="checkbox"/>
	50 - 59	<input type="checkbox"/>
	60 - 65	<input type="checkbox"/>
	Over 65	<input type="checkbox"/>
	Prefer not to say	<input type="checkbox"/>

Thank you for completing this questionnaire – please return the form to Personnel

Referees

Please give details of two people not related to you who may be approached for references as to your suitability for the post. One of these must be your current or most recent employer. If you are still in, or just completing your education please give your college tutor.

Referee no. 1	Referee no. 2
Name:	Name:
Occupation/Relationship:	Occupation/Relationship:
Address:	Address:
Telephone:	Telephone:

May references be sought prior to interview?

YES NO

Hobbies and interests

Please note especially the following section:

Rehabilitation of Offenders Act 1974

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 Rehabilitation of Offenders Act 1974 (Exemptions) Orders 1975. Applicants are therefore not entitled to withhold information about convictions which for other purposes are 'spent' under the provisions of the Act, and, in the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action by the Management of Aspen Healthcare Ltd. Any information given will be completely confidential.

I understand that appointment, if offered, will be subject to the information given on this form being correct and that canvassing or failure to disclose a relationship to a member of Aspen Healthcare Ltd staff will disqualify me from consideration as will my failure to disclose pertinent facts relating to previous employment. I also understand that my appointment is subject to a satisfactory pre-employment medical screening.

Aspen Healthcare Ltd is an equal opportunities employer and as an employee you will be required to pursue your duties in accordance with it's equal opportunities policy.

You are required to acknowledge by signing below your agreement and understanding of these statements.

Applicant's Signature:

Date: