



Applicants' Guide

Application Form

The application form must be completed and where it is not applicable please enter "N/A". You may enclose a CV, but this will be considered in addition to the application form. We are required to submit statistical data to the National Minimum Data Sets, the Department of Health and Local Authorities. The application form is the system that we use to collect that data.

Declarations

Any declaration made on the form will be completely confidential no matter the nature of the information.

References

Please ensure that you complete the information regarding referees. References are always requested as a confidential statement and therefore are never disclosed to the applicant. **The first reference must be of your last employer..** We strongly advise that you seek permission from your referee before completing the application form. Any delay in the gathering of this information could impede any decision regarding your suitability for appointment. Where a reference is considered insufficient to make a decision a third reference will be requested. This must be from a previous employer in the last ten years where you have worked for at least three months.

References are always sought before any decision can be made regarding your suitability for employment.

Disclosure and Barring Service (DBS) check

These checks are mandatory under the Health and Social Care Act 2008. It is vital that you declare any criminal activity even where that conviction is deemed spent under the Rehabilitation of Offenders Act 1974. Any disclosure of criminal activity resulting in a Caution, Reprimand or Conviction will not of itself preclude your appointment to the post, however, non disclosure of any criminal activity will result in any job offer being withdrawn. Trust is a fragile thing and honesty from the outset must be there in order for a clear and transparent working relationship to be developed. In completing the DBS form, new forms are now in place and all sections marked in yellow must be completed. Continuation sheets if any are required, are available from www.homeoffice.gov.uk/dbs

Appointed Applicants

On receipt of appropriate references, a job offer will be made which is subject to DBS checks. On completion of the DBS form, evidence needs to be seen with the completed application. This includes

- Utility Bill
- Passport
- Birth Certificate
- Driving License
- International ID Card
- NI Card
- Other Identity Documentation
- Work permit
- Non EU Immigration Documentation

You will be informed of which documentation is relevant to your application. The Immigration Asylum and Nationality Act 2006 requires us as employers to make checks as to your legal status of employment within the UK. Certain documents will be checked if you are a non EU National in order to comply with this Act. Access Your Care Ltd complies fully with The Border and Immigration Agency guidance for employers in this regard. Documentation must be originals only, copies will be kept for file purposes only.

The mandatory checks which have to be in place in order to safeguard service users inevitably mean a long recruitment process. We advise all new staff that are currently employed to give their notice only when we are able to confirm a job offer.

We will therefore be keeping in touch with you throughout the period of the recruitment process. We will agree the methods used e.g. Mobile phone, email etc. at your convenience.

Induction Training

All staff must undertake an induction programme tailored to their experience, qualifications and competencies. This is mandatory. The induction follows the Skills for Care Common Induction Standards 1 – 8. Your induction must be completed within a maximum of 13 weeks, during which time you are monitored as part of your probationary period of employment.

And finally...

Please do not be put off! We hope that this demonstrates that we have a robust recruitment and selection procedure and that we set our standards high in order to ensure the safeguarding and protection of our service users.



ACCESS YOUR CARE
Life on your terms

APPLICATION FOR EMPLOYMENT

APPLICATION FOR POST OF:

PERSONAL DETAILS

TITLE:

SURNAME:

PREVIOUS SURNAME
(IF APPLICABLE):

FORENAME:

ADDRESS:

POSTCODE:

EMAIL ADDRESS:

HOME TELEPHONE
NUMBER:

MOBILE TELEPHONE
NUMBER:

DO YOU HOLD A FULL
CURRENT
DRIVING LICENCE?

Please specify if this if for a motor car or motor bike

IMMIGRATION (RESTRICTIONS ON EMPLOYMENT) ORDER 2004

If you are not an existing employee of Access Your Care Ltd and you are offered this job, confirmation of appointment will be subject to you providing documentary evidence to confirm that you are eligible to live and work in the United Kingdom. A full list of approved documents deemed acceptable for this purpose is held by Access Your Care Ltd and will be issued to you at the time of the job offer.

OTHER EMPLOYMENT MATTERS

HOW DID YOU BECOME
AWARE OF THIS JOB?

WHAT DAYS & TIMES YOU
WOULD PREFER TO WORK?

EDUCATION

DATES	EXAMINATION	SCHOOL, COLLEGE, UNIVERSITY	GRADE

CURRENT EMPLOYMENT

Please include your present Job(s) or last job if you are not currently employed and any regular secondary employment

DATES EMPLOYED	EMPLOYER	JOB TITLE	REASONS FOR LEAVING

Please describe your main duties and responsibilities of your most recent job(s)

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EMPLOYMENT HISTORY

Please provide your job history prior to your current employment starting with most recent.

This section of the application must be completed IN FULL from the time of leaving full time education. (Please continue on separate sheet if necessary AND explain any employment gaps)

DATES EMPLOYED	EMPLOYER	JOB TITLE	REASON FOR LEAVING

RELEVANT EXPERIENCE

Please use the space below to explain why you are applying for this job and how your experience and personal qualities/skills help to make you a suitable candidate.

Please refer to the job description for further details of the role you are applying for.

IMPORTANT: If you enclose extra sheets in support of your application you must include your name and sign the paper after the last full stop

SICKNESS / INJURY: Please detail your sickness/injury absence record at work for the last 2 years:

REFERENCES

Please give the names of two referees who have agreed to give references. One of your referees should be from your present employer and the other from your previous employer. In case of applicants leaving fulltime education, or not having worked within the past year, the Head of School, College, University etc. should be named as one of the referees or a professional person who has known you for longer than 18 months.

REFEREE ONE		REFEREE TWO	
NAME:		NAME:	
POSITION:		POSITION:	
EMAIL:		EMAIL:	
ADDRESS:		ADDRESS:	
POSTCODE:		POSTCODE:	
TELEPHONE NO:		TELEPHONE NO:	
In what capacity do you know the above?		In what capacity do you know the above?	

INTERVIEW DATES

Please give details of when you will not be available for interview within the next 6 weeks.

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Please return the application form to the following address:

Access Your Care Ltd
Unit 3 22A Griffin Road
Clevedon
BS21 6HH

Email: Info@accessyourcare.co.uk

EQUAL OPPORTUNITIES IN EMPLOYMENT

Access Your Care Ltd is committed to developing inclusive personnel policies. Our recruitment and selection procedures aim to stop any unfair discrimination, whether to do with ethnic origin, disability, sex, sexual orientation, marital status, HIV/Aids, ex-offenders, religion, political beliefs, trade union activities or age.

To check that we are being successful in this and that we meet the law, we need to monitor our recruitment process. The Race Relations (Amendment) Act 2000 requires us to monitor our staff profile by ethnicity and publish the results without identifying individuals.

Please complete this part of the application form so that we can check whether we are, in fact, receiving applications from all sections of the community, that candidates receive fair and equal treatment at all stages and that we comply with the law.

This sheet will be separated from the rest of the application form immediately on receipt and before the selection of candidates for interview takes place.

Do you consider yourself to have a disability? YES NO

All shortlisted candidates will be invited to advise us if they have a disability and whether they require specific arrangements to be made when called for interview.

Are you permitted to work in the UK? YES NO

What is your ethnicity?

Please tick appropriate box

White: British English Welsh Scottish Irish

Any other white background:

Mixed: White & Black Caribbean White & Black African White & Asian

Any other mixed background:

Asian/
Asian
British Indian Pakistani Bangladeshi Chinese

Any other Asian or Asian British background:

Black/
Black
British African Caribbean

Any other Black or Black British background:

Any other ethnic Group *Please specify*

Prefer to not say: Yes No

Which of the following best describes your religion/belief?

Buddhist Hindu Jewish Muslim Sikh Christian None

Prefer not to say

Any other religion/belief:

CRIMINAL CONVICTIONS

Have you ever been convicted of a criminal offence? Yes No

Is the offence "spent" as defined by the Rehabilitation of Offenders Act 1974?

Yes No

All posts working with children, families and vulnerable adults are subject to a satisfactory Disclosure & Barring Service (DBS) check. These types of posts are exempt from the Rehabilitation of Offender's Act normal rules. This means that for these types of posts any conviction ever received must be declared so that Access Your Care Ltd can make a decision on whether a person is suitable to carry out the job applied for. These checks are compulsory to ensure the safety of persons to whom we provide services. A conviction is not necessarily a bar to employment with Access Your Care Ltd, but if you have answered 'YES' you will, if short-listed for interview, be invited to discuss your conviction at your interview.

DECLARATION

I certify that the information given by me on this application form is true to the best of my knowledge and I understand that if I am appointed and such information is subsequently found to be materially incorrect, Access Your Care Ltd will be entitled to terminate my employment without notice

Signed:

Date: