

FULL EMPLOYMENT HISTORY: *Please begin with most recent, giving details of any gaps in employment. Continue on additional sheets of paper if necessary. [Full history required - from leaving secondary education to present date].*

Name & Address of Employer	Post & Brief Outline of Duties	From – To (Month and Year)	Salary & Reason for Leaving

RELEVANT EXPERIENCE: Please add any relevant experience that might assist your application.

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TRAINING: Please include any special training or short courses relevant to this application

Course Title	Organising Body	Date

DRIVING

Are you a vehicle owner ?	YES / NO
Do you hold a clean driving licence? <i>If no please list any convictions, in the space provided.</i>	YES / NO

EQUALITY AND DIVERSITY: Horizon Care Ltd is committed to equality and diversity and it is our policy to recruit the right person irrespective of disability, ethnic origin or gender

I am Male <input type="checkbox"/> Female <input type="checkbox"/>
I would prefer to describe my ethnic origin as _____
If you are registered disabled, please state: YES/NO
If yes please give: Reference no.: _____ Registration date _____

PERSONAL STATEMENT: *In this section you should explain why you want this job, and drawing from your knowledge, skills, and experience provide evidence of your suitability for the post.*

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REFEREES: *Please include below the name, status, address & telephone number of three referees, one of whom must be your current or most recent employer*

Current/Most Recent Employer and Name of Line Manager	
2)	
3)	
Can referees be approached prior to interview?	YES / NO
If appointed, when would you be available to start?	

HEALTH DECLARATION

What is your general health condition? Please circle as appropriate.

Excellent

Good

Average

Poor

How many days have you had off sick in the last year?

If yes please give details below

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Have you had any major illness in the last five years? Yes / No

If yes please give details below

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Is there any medical condition/illness/disability that you feel Horizon Care Ltd should be made aware of? Yes / No

If yes please give details below

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Have you had more than two weeks off work in the last two years?

Yes / No

If yes please give details below

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DECLARATION: Please note that failure to complete this section of your application will result in your application not proceed any further

Before completing this section please read this:

The post for which you are applying is exempt under the provision of the Rehabilitation of Offenders Act 1974 (Exceptions Order 1975).

This means you must give full details of any criminal conviction, including any spent convictions, or pending circumstances that might lead to prosecution, conviction, bind-over or caution.

The disclosure of a criminal record, or other information, will not necessarily debar you from appointment. In making this decision Horizon Care Ltd will consider the nature of the offence, how long ago and what age you were when it was committed. Also any other factors, which may be relevant can be given consideration, including considerations in relation to the company's equality policies.

Any information you give will be treated in confidence.

1. Do You Have Any Criminal Convictions, Driving Offences, Bind-Over Or Cautions? If Yes Please Give Details. If you have none, please state **"I Have No Convictions, Cautions Or Pending Court Cases."**

2. Are you subject to any current or outstanding disciplinary procedures, or have you ever had action taken against you by an authority regarding children under 18 years old? **If so, please give details.**

Applicants need to be aware that Horizon Care Ltd carries out a disclosure on all people we decide to appoint. Information received from the CRB will be kept in strict confidence.

Failure to declare a conviction, caution or bind-over may, however, disqualify you from appointment, or result in summary dismissal if the discrepancy comes to light.

"I take notice that if I have any convictions and do not declare them, or withhold information which is relevant to my application, or if information provided in my application is untrue, I understand I will be instantly dismissed. I confirm that I have read, understood and have truthfully answered the above questions and that everything else in this application (including any additional pages) is, to the best of my knowledge, accurate and correct."

Do you hold a Enhanced CRB Disclosure Form, dated within a year old? Yes / No

If Yes please complete the following:

Issue date: Disclosure No:

Countersignatory Details

Print Name: Signature: Date: