**APPLICATION FORM**

**Please complete fully and in CAPITALS**

|  |  |
| --- | --- |
| Forename |  |
| Surname |  |
| Address |  |
| Postcode |  |
| Date of Birth |  |
| Landline / Mobile Number |  |
| Email Address |  |
| National Insurance Number |  |
| Previous Address  (If current address less than 5 years) |  |
| GP Name and Address |  |
| Current Driving Licence | Full / provisional Own transport yes / no auto/manual  Any Endorsements/ convictions  Driving Licence number |
| Next of Kin  name and address |  |
| Telephone Number |  |
| Position applied for | |
| Contract type and hours Regular Bank | |
| **EDUCATION** | |
| School / College / University | GCSE’s / A-Levels / Diplomas / Degrees |
| Additional courses  Professional updates |  |
| **EMPLOYMENT HISTORY** | |
| Name and address of employer |  |
| Job Title |  |
| Dates employed |  |
| Reason for leaving |  |
|  |  |
| Name and address of employer |  |
| Job Title |  |
| Dates employed |  |
| Reason for leaving |  |
|  |  |
| Name and address of employer |  |
| Job Title |  |
| Dates employed |  |
| Reason for leaving |  |
|  |  |
| Please note reasons for any gaps in employment over the last 10 years.  Continue overleaf if needed. |  |
| **REFEREES – 2 previous employers and 1 character reference** | |
| **Name** |  |
| Address |  |
| Telephone number |  |
| E-Mail |  |
|  |  |
| **Name** |  |
| Address |  |
| Telephone number |  |
| E-Mail |  |
|  |  |
| **Name** |  |
| Address |  |
| Telephone number |  |
| E-Mail |  |

|  |
| --- |
| **CRIMINAL RECORD – please declare any criminal convictions, whether spent or not.** |
|  |
| **Signature and Declaration – Important – Please read before Signing** |
| I declare that to the best of my knowledge and belief the information given by me in this application is true and I understand that the above information forms the basis of my contract of employment. I understand that if any of the information provided by me is found to be falsely declared, my contract may have been fundamentally breached and my employment may be terminated.  I understand that I may not be offered a post until a satisfactory response has been received with respect to my DBS Register status and two satisfactory references.  I understand that until these responses are confirmed I will be supervised at all times at work and not have unsupervised access to vulnerable clients.  By my signature, I authorise Exclusive Therapies Limited to request a DBS register check and a criminal record check and I understand I must inform my employer immediately if my criminal record changes at any time.  SIGNED NAME DATE |