

Please Attach 2 Passport Photos

**APPLICATION FOR EMPLOYMENT**

Job Title	
Job Reference Number	

**Personal Details**

* Surname/Family Name			
* First Names			
Name in which you are registered with a professional body (if applicable)			
Title		Marital Status	
Address			
* Postcode code		* UK National Insurance No	
Home Telephone		Mobile Telephone	
Work Telephone		May we contact you at work?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Email Address			
* Are you a United Kingdom (UK), European Community (EC) or European Economic Area (EEA) National?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
Do you have leave to enter/remain and the right to work in the United Kingdom (UK)?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
Please select the category that relates to your current immigration status.			
<input type="checkbox"/> Work Permit <input type="checkbox"/> Dependant / Spouse visa <input type="checkbox"/> Clinical attachment visa <input type="checkbox"/> Visitor		<input type="checkbox"/> Leave to remain/enter <input type="checkbox"/> Working holiday visa <input type="checkbox"/> Refugee <input type="checkbox"/> Other, please specify below	
Please supply details of any permit currently held, including number, validity and expiry date			

Have you been Immunised against the following:		
Hepatitis B:	Yes/ No	Date:
MMR:	Yes/ No	Date:
Varicella	Yes/ No	Date:
Tetanus, diphtheria:	Yes/ No	Date:
Please Enclose copies of Immunisation History:		

**MONITORING INFORMATION**

This section of the application form will be detached from your application form and will be used for monitoring purposes only.

NHS Organisations recognise and actively promote the benefits of a diverse workforce and are committed to treating all employees with dignity and respect regardless of race, gender, disability, age, sexual orientation, religion or belief. We therefore welcome applications from all sections of the community.

* Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> I do not wish to disclose this
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**Disability Discrimination Act 1995**

The Disability Discrimination Act protects disabled people. This includes people with long-term health conditions. If you tell us that you have a disability we can make reasonable adjustments to where you work and your work arrangements and at interview.

* Do you consider yourself to have a disability?	<input type="checkbox"/> Yes	<input type="checkbox"/> I do not wish to disclose this information	<input type="checkbox"/> No
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**Rehabilitation of Offenders Act 1974**

The Rehabilitation of Offenders Act helps rehabilitated ex-offenders back into work by allowing them not to declare criminal convictions to employers after the rehabilitation period set by the Court has elapsed and the convictions become 'spent'. During the rehabilitation period, convictions are referred to as 'unspent' convictions and must be declared to employers.

Before you can be considered for appointment with the NHS we need to be satisfied about your character and suitability.

The NHS aims to promote equality of opportunity and is committed to treating all applicants for positions fairly and on merit regardless of race, gender, marital status, religion, disability, sexual orientation or age. The NHS undertakes not to discriminate unfairly against applicants on the basis of a criminal conviction or other information declared.

* Have you any unspent criminal convictions or bindovers, or any cautions, warnings or reprimands?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please give details		

If you are applying for a post involving access to persons in receipt of health services, your offer of employment may be subject to a satisfactory disclosure from the Criminal Records Bureau. Failure to reveal information relating to any convictions could lead to withdrawal of an offer of employment.

## Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975

In order to protect certain vulnerable groups within society, there are a number of posts within the NHS that are exempt from the provisions of the Rehabilitation of Offenders Act 1974. These include positions where there is access to patients in the course of normal duties. As the post you have applied for falls within this category, it will be exempt from the provisions of the Rehabilitation of Offenders Act by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975.

Applicants for such posts are not entitled to withhold any information about convictions, cautions, warnings and reprimands which for other purposes are "spent" under the provisions of the Act. If you are successful with this application, any failure to disclose such information could result in dismissal or disciplinary action. Any information provided will be confidential and will be considered only in relation to posts to which the Order applies. A check will be made with the Criminal Records Bureau.

* Have you at any time received or had pending a criminal conviction, caution, warning, reprimand or bind-over?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please give details		

### \* DECLARATION

The information in this form is true and complete. I agree that any deliberate omissions, falsification or misrepresentation in the application form will be grounds for rejecting this application or subsequent dismissal if employed by the organisation. This applies equally to any medical questionnaire/forms I may complete.

I agree to the above declaration			
Signature			
Name		Date	

Where did you see this vacancy advertised?	
<input type="checkbox"/> Website <input type="checkbox"/> Other Website <input type="checkbox"/> Nursing Standard	<input type="checkbox"/> Other Professional Journal <input type="checkbox"/> Jobcentre Plus <input type="checkbox"/> Other

# APPLICATION FOR EMPLOYMENT

## Education & Professional Qualifications

Include in this section all the relevant qualifications. Please also indicate subjects currently being studied.			
Subject/Qualification	Place of Study	Grade/result	Year

## Membership of Professional Bodies

Include in this section any relevant professional registrations or memberships.

* Please indicate your Professional Registration status:	
<input type="checkbox"/> Not Required for this post <input type="checkbox"/> I have current UK registration	<input type="checkbox"/> UK registration applied for <input type="checkbox"/> UK registration not yet applied for <input type="checkbox"/> I am a student

If professional registration is not required then go to **Employment History**.

If you are registered then please enter the relevant details below:			
Professional Body	Membership or Registration type	Membership/Registration PIN	Expiry/Renewal Date

If you are applying for a post that requires professional registration you are required to provide the following information:

Are you currently the subject of a fitness to practise investigation or proceedings by a licensing or regulatory body in the UK or in any other country?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you been removed from the register or have conditions been made on your registration by a fitness to practise committee or the licensing or regulatory body in the UK or in any other country?	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Employment History

Please record below the details of your current or most recent employer

Employer Name			
Address			
Type of Business		Telephone	
Job Title			
Start Date		End Date	
Start of continuous NHS service			
Grade		Salary	
Reporting to (job title)		Notice Period	
Reason for leaving (if applicable)			

## Previous Employment

Please record below the details of your previous **since leaving full time education** employment beginning with the most recent first. Please explain any gaps in employment in the **'Supporting Information'** section. Please add additional employers/information on a separate sheet.

### Previous Employer 1

Employer Name			
Address			
Job Title		Grade	
From Date		To Date	
Reason for Leaving			
Description of your duties and responsibilities			

## Previous Employers

Employer Name			
Address			
Job Title		Grade	
From Date		To Date	
Reason for Leaving			
Description of your duties and responsibilities			

Employer Name			
Address			
Job Title		Grade	
From Date		To Date	
Reason for Leaving			
Description of your duties and responsibilities			

## Previous Employers

Employer Name			
Address			
Job Title		Grade	
From Date		To Date	
Reason for Leaving			
Description of your duties and responsibilities			

Employer Name			
Address			
Job Title		Grade	
From Date		To Date	
Reason for Leaving			
Description of your duties and responsibilities			

**Previous Employer / Professional Reference**

Employer Name			
Address			
Job Title		Grade	
From Date		To Date	
Reason for Leaving			
Description of your duties and responsibilities			

**Supporting Information**

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## References

Please give the names of the people who have agreed to supply references. For all positions you must provide 2 references. If you are, or have been employed, *these should be: 1 from your previous employer and 2. any professional reference.* These may include your line manager or someone in a position of responsibility who can comment on your work experience, competence, personal qualities and suitability for the post. If you are a student please provide contact details of a teacher at your school, college or university. Please note that personal references such as friends and relatives are not acceptable. For all posts written references obtained must cover the preceding 3 years of employment.

### Referee 1

*Surname/Family name		First Name	
Title			
Job Title			
*Address			
*Post Code/ Zip Code		*Country	
Telephone		Fax	
Email			
* Relationship			

### Referee 2 (must be from a Social Care Employment if applicable)

*Surname/Family name		First Name	
Title			
Job Title			
*Address			
*Post Code/ Zip Code		*Country	
Telephone		Fax	
Email			
* Relationship			

If you have applied to us within the last 3 months, are you happy for us to use the references from your earlier application?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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