**Job application form** 

Parkview Care is committed to the safeguarding and promotion of the welfare of all children and young people.

Please complete all this form in type or black ink and use only the same size

paper (A4) as continuation sheets. N.B. CV’s will not be accepted.

x

To fill out the tick boxes, place an X in the box that applies:

**Job details**

|  |  |
| --- | --- |
| **Position applied for** |  |
| **Please indicate preferred working arrangements**  | Full time  | Part time  | Bank |
| **Name of home** |  |
| **Location** |  |
| **Reference number** |  |
| **How did you hear about** **this vacancy?** |  |

**Personal details**

|  |  |
| --- | --- |
| **Surname** |  |
| **Previous surname(s)** |  |
| **Name of home** |  |
| **Title (select as appropriate)**  | Mr  | Mrs  | Miss  | Ms  | Other |
| **Preferred name** |  |
| **Address (inc postcode)** |  |
| **Email address** |  |
| **Daytime telephone number** |  |
| **Mobile** |  |
| **Home** |  |
| **National insurance number** |  |
| **Preferred name** |  |

**Present employment**

|  |  |
| --- | --- |
| **Job title** |  |
| **Name and address of employer** |
| **Date commenced** **with employer** |  |
| **Current salary** |  |
| **Notice required** |  |
| **Reason for leaving**  |  |
| **Does this role involve** **working with children?** |  |
| Briefly describe your present job; its main purpose and your responsibilities: |

**Previous full employment since leaving school**

Please list most recent first. Include permanent and temporary work, service with HM Forces, voluntary work and any work experience from leaving school **(please continue on a separate sheet if necessary).**

**You must include the day, month and year for each response.**

|  |  |
| --- | --- |
| **Job title** |  |
| **Name of employer** |  |
| **Address of employer** |  |
| **From / To (exact dates):** |  |
| **Salary** |  |
| **Reason for leaving** |  |
| **Did this role involve working with children or young people?** |  |
| **If Yes, please state email address:** \*Business email only |  |

|  |  |
| --- | --- |
| **Job title** |  |
| **Name of employer** |  |
| **Address of employer** |  |
| **From / To (exact dates):** |  |
| **Salary** |  |
| **Reason for leaving** |  |
| **Did this role involve working with children or young people?** |  |
| **If yes, please state email address:** \*Business email only |  |

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| --- | --- |
| **Job title** |  |
| **Name of employer** |  |
| **Address of employer** |  |
| **From / To (exact dates):** |  |
| **Salary** |  |
| **Reason for leaving** |  |
| **Did this role involve working with children or young people?** |  |
| **If yes, please state email address:** \*Business email only |  |

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| --- | --- |
| **Job title** |  |
| **Name of employer** |  |
| **Address of employer** |  |
| **From / To (exact dates):** |  |
| **Salary** |  |
| **Reason for leaving** |  |
| **Did this role involve working with children or young people?** |  |
| **If yes, please state email address:** \*Business email only |  |

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| --- | --- |
| **Job title** |  |
| **Name of employer** |  |
| **Address of employer** |  |
| **From / To (exact dates):** |  |
| **Salary** |  |
| **Reason for leaving** |  |
| **Did this role involve working with children or young people?** |  |
| **If yes, please state email address:** \*Business email only |  |

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| --- | --- |
| **Job title** |  |
| **Name of employer** |  |
| **Address of employer** |  |
| **From / To (exact dates):** |  |
| **Salary** |  |
| **Reason for leaving** |  |
| **Did this role involve working with children or young people?** |  |
| **If yes, please state email address:** \*Business email only |  |

**Time breaks in employment**

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| Please describe all time spent since leaving full-time education. Full details should be given for any period not accounted for by full-time employment, education and training. This would include e.g. unemployment or voluntary work. Please state in chronological order. **(please continue on a separate sheet if necessary).** **You must include day, month and year for each response.** |
| **From (exact dates)**  | **To (exact dates)**  | **Reason for break**  |
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**Education and qualifications**

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| From age 11 onwards, and please state whether full (F) or part (P) time. **You must include day, month and year for each entry.** |
| **Name of school, college, university etc**  | **From / To**  | **F/P**  | **Subjects studied** **(with grades and year taken)** |
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**Training**

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| This includes government training schemes, apprenticeships, short courses, projects and secondments. Please also include trade/professional training and give date of completion. **(Please continue on a separate sheet if necessary)** |
| **Course title**  | **Organisation**  | **From / To** |
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**Ofsted history**

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| For Home or Deputy Manager positions only. **(Please continue on a separate sheet if necessary. )** |
| **Name of home**  | **Inspection grading**  | **URN (if known)**  |
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**Membership of professional institutes**

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| --- |
| Please indicate whether membership is by examination |
| **Institute**  | **Level of membership**  | **Year of award** |
|  |  |  |
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**Leisure interests**

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 **Driving licence**

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| --- | --- |
| **Do you hold a current driving licence?** (delete as applicable) | Yes \ No |
| If YES, please state the type of license you hold |  |
| **Do you have any current endorsements?** (delete as applicable) | Yes \ No |
| If YES, please specify: |  |

**Why are you applying for this job?**

Please mention any specific skills or experience that meets the requirements of the job description and person specification. These skills may have been gained in relation to your current or previous employment, education, training, domestic activities, voluntary work or leisure interests.

**(Please continue on a separate sheet if necessary).**

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**References**

Please provide three references. One must be your present or most recent employer (where applicable) and another second employer. If you have not been employed previously, please provide academic and character references.

**For care related positions, we require email addresses of all previous employers that involve working with children, young people or vulnerable adults.**

**Note**: We reserve the right to seek references at any point in the recruitment process and from any previous employers listed in the ‘Previous Employment’ section of this form.

For posts within Children’s Residential Services, employment references will be automatically sought even if you have stated ‘no’ in the ‘may we contact’ boxes below.

Please contact us immediately if this is a cause for concern. **Present/last employer**

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| --- | --- |
| **Name** |  |
| **Address** |  |
| **Tel No.** |  |
| **Occupation** |  |
| **Email address:** \*Business address only |  |
| **May we contact this referee prior to interview?** (delete as applicable)  | Yes / No |

**Second employer**

|  |  |
| --- | --- |
| **Name** |  |
| **Address** |  |
| **Tel No.** |  |
| **Occupation** |  |
| **Email address:** \*Business address only |  |
| **May we contact this referee prior to interview?** (delete as applicable) | Yes / No |

**Personal Referee or course tutor (if applicable)**

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| --- | --- |
| **Name** |  |
| **Address** |  |
| **Tel No.** |  |
| **Occupation** |  |
| **Email address:** \*Business address only |  |
| **May we contact this referee prior to interview?** (delete as applicable) | Yes / No |

**Warnings and disciplinary issues**

|  |  |
| --- | --- |
| **Have you ever been dismissed, or have you ever resigned in the face of a dismissal or warning?**  | Yes / No |
| **Have you ever been the subject of any allegations in relation to the safety and welfare of children, young people and/or vulnerable adults, either substantiated or unsubstantiated?** | Yes / No |
| If you have answered yes to any of the above questions, you must supply details on a separate sheet of paper, place it in a sealed envelope marked confidential and attach it to your application form. |
| **I have attached details requested** (delete as applicable) | Yes / No |

**Rehabilitation of Offenders Act 1974**

You are required to declare any criminal convictions (including bind over and cautions) in accordance with the Rehabilitation of Offenders Act 1974. The post you have applied for carries exempt status under the provisions of the Act for which you are required to declare any convictions regardless of whether or not the time limit has elapsed. All appointments are subject to an enhanced DBS check. N.B. Declaration of convictions will not necessarily bar you from employment.

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| --- | --- |
| **Have you ever been convicted of a criminal offence?** (delete as applicable)  | Yes / No |
| **Are there any alleged offences outstanding against you?**  | Yes / No |
| If YES to any of the above, please give details in a sealed envelope marked ‘strictly confidential’. Failure to disclose any information relating to criminal convictions may disqualify your application or result in dismissal without notice.  |

**Immigration, Asylum and Nationality Act 2006**

|  |  |
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| **Do you have the right to take up employment in the UK, either as a UK National, or because you hold a valid work permit?** (delete as applicable) | Yes / No |

**Declaration of interests**

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| --- | --- |
| **Do you have any relationships with any person employed by or connected with Parkview Care?** (delete as applicable) | Yes / No |
| If YES, please give full details (stating department and job title): |

**Parkview Care disclaimer form**

The Disqualification for Caring for Children Regulations 2002 applies to anyone employed in a registered or voluntary children’s home. The Regulations set out grounds for disqualification from caring for children. These fall into three main areas:

1. Where a child of the individual has at any time been the subject of a care or similar order, or where an order has been made with the purpose of removing a child from the individual’s care or preventing the child from living with him/her.
2. Where the person has been convicted of an offence specified in Schedule 1 of The Children and Young Persons Act or one involving injury or threat of injury to another person.
3. Where:

The person has been concerned with a voluntary or registered children’s home which has been removed from the register;

 *or*

An application by the person for registration of a voluntary or registered children’s home has been refused.

*or*

The person has been prohibited from being a private foster parent, or the person has been refused registration to be a child minder or provider of day care or had his/her registration cancelled.

I have read and understood the above and declare that I am not disqualified from caring for children under The Disqualification for Caring for Children’s Regulations 2002.

**Name: (please print)**.………………………………………………………………..........................………………

**Signed**:………………………………............................…………………… **Date**:…………………………...............

 **Declaration**

|  |
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| I declare that the information given both on this application form, disclaimer form and the attached equal opportunities monitoring form is true and correct. I understand that any false or misleading information, or omissions of information concerning canvassing or criminal convictions, may disqualify my application or may render my Contract of Employment, if I am appointed, liable to termination. |
| **Signed** |  |
| **Date** |  |
| **Print name** |  |
| **If form has been completed electronically, please place an ‘x’ in this box to indicate your consent** |  |

**General Data Protection Regulation (GDPR)**

|  |
| --- |
| As part of any recruitment process, Parkview Care collects and processes personal data relating to job applicants. The organisation is committed to being transparent about how it collects and uses that data and to meeting its data protection obligations. Parkview Care will only process the information you have provided in this form for the purpose of recruitment and selection and, if you are successful in securing this position, for purposes relating to your employment. Completed application forms and supplementary information provided by you in support of your application will be retained by the HR Department in a secure place for a period of 6 months, after which time the information will be destroyed, excepting for persons who subsequently take up employment with the organisation. To view our Privacy Notice for all Job applicants in full, please go to [**www.parkviewcare.co.uk/parkview-care-gdpr**](http://www.parkviewcare.co.uk/parkview-care-gdpr)or [**www.parkviewcare.co.uk/parkview-education-gdpr**](http://www.parkviewcare.co.uk/parkview-education-gdpr) |
| Should you be unsuccessful in your application for the position applied for but would like us to send you information about future vacancies, please place an ‘x’ in the box to indicate your consent. You can withdraw your consent at any time by contacting a member of the HR Department by phone on **0345 647 7777**, by email at **hr@parkviewcare.co.uk**or in writing using the address below. |  |
| **Date** |  |
| **Print name** |  |
| **If form has been completed electronically place an ‘x’ in this box to indicate your consent** |  |

**Reasonable adjustments**

If you require any reasonable adjustments to the recruitment process, including completion of this application form and interview, please provide details on a separate sheet of paper. Alternatively, please contact a member of the HR Department on **0345 647 7777** to discuss further.

**How to return your form**

Please send your completed application form and upload it to our website or send it to **hr@parkviewcare.co.uk** or by post: **Parkview Care, Human Resources Department. The Brentano Suite, Solar House, 915 High Road, London, N12 8QJ**

If you are returning your application by post, please ensure you use the correct postage for the size, weight and thickness of your envelope.

We take this opportunity to thank you for your application and for your interest in Parkview Care.

**Confidential: Equal opportunities in employment - monitoring form**

**This section will be removed for monitoring purposes before the selection process begins and will not affect the consideration of your application.**

Everyone is unique owing to differences in age, gender, ethnic origin, religion, sexual orientation, ability etc. Parkview Care aims to treat these differences positively, recognising that diversity creates a strong, flexible and creative workforce. The Company’s Equality of Opportunity Policy states that all applicants are to be treated fairly, and selection for appointment is to be based solely on a person’s ability to do the job. As part of this process, we monitor our recruitment processes to identify whether minority groups are being treated equitably.

This information will not affect the consideration of your application.

|  |  |
| --- | --- |
| **Job applied for** |  |
| **Job No. or Ref (if applicable)** |  |
| **Location** |  |
| **How did you learn of this vacancy?** |  |
| **Age:**  | **Date of birth:**  | **Gender:** |

 **Ethnic origin**

This is the origin of your family rather than your nationality. For example, you could be British and your ethnic (family) origins could be any of the ones listed below, or a combination of them, or something more specific.

Please identify your ethnic origin by putting an ‘x’ in ONE of the boxes below or by giving your own description in the space provided.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| a. | **White**  | **British**  | **Irish**  | **Gypsy/** **Romany** | **Other white background** |
| b. | **Mixed**  | **White & Black Caribbean** | **White & Black African** | **White & Asian**  | **Other mixed background** |
| c. | **Black or Black British** | **Caribbean**  | **African**  | **Any other Black background**  |
| d. | **Asian or Asian British** | **Indian**  | **Pakistani**  | **Bangladeshi**  | **Other Asian background** |
| e. | **Other ethnic groups** | **Chinese**  | **Other** (Please specify) |

**Disability guidance**

Where an applicant has a disability, and they meet the essential criteria of the post they are automatically shortlisted for interview. This positive action helps ensure people with disabilities get their fair share of jobs.

The Equality Act 2020 says that a person is disabled if they have a mental or physical impairment or long-term health condition which has a substantial adverse effect on their ability to carry out normal day-to-day activities.

If you consider yourself to be disabled, please let us know. We would appreciate advice on help we can give to enable you to attend or participate in the interview. At the interview you will be asked if you have any disability which would affect your ability to do the job, and, in compliance with The Equality Act 2010, you will be asked what reasonable adjustments we might arrange to assist you.

|  |  |
| --- | --- |
| **Do you consider yourself to be disabled as set out in the Disability Discrimination Act?** (delete as applicable) | Yes / No |
| If YES, please describe your disability. |
| **If you need any assistance to attend or participate in the interview, please give details.** |

**Religion**

Please identify your religion by putting an ‘x’ in ONE of the boxes below.

|  |  |  |
| --- | --- | --- |
| **Christian**  | **Buddhist**  | **Hindu** |
| **Jewish**  | **Muslim**  | **Sikh** |
| **Other religion**  | **No religion**  | **Prefer not to say** |

**Sexual orientation**

Please identify your sexual orientation by putting an ‘x’ in ONE of the boxes below.

|  |  |  |
| --- | --- | --- |
| **Bisexual**  | **Gay man**  | **Gay woman / lesbian** |
| **Heterosexual / straight**  | **Other**  | **Prefer not to say** |