**SERVICES FOR INDEPENDENT LIVING**

**APPLICATION FORM**

Please return via e-mail or post to:

Services for Independent Living

1 Owen Way

Leominster Enterprise Park

Leominster

HR6 0LA

Reference (if applicable):

Post Applying For: SUPPORT WORKER WORKER

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| **Personal Details** | | | |
| **Title:** | **Forename:** | | **Surname:** |
| **Address:**  **Postcode:** | |  | |
| **Telephone:** | | **Mobile:** | |
| **Email** | | | |
| **National Insurance Number:** | | | |
| **Do you hold a current driving license Yes/No**  **Do you have any endorsements: Yes/No**  **If Yes please give details** | | | |
| **If you are offered the role, will you have any other work commitments outside of this organisation: Yes/No** | | **If Yes please give details** | |
| PLEASE COMPLETE THIS SECTION IF YOU ARE **NOT** A BRITISH CITIZEN: | | | |
| Note: the company will require proof of this right before an offer of employment can be confirmed –  eg. Birth certificate and/or any other appropriate document required to confirm your right to work in  the UK as required by the Asylum and Immigration Act 1996  Do you have the right to work in the UK? YES/NO  Please give details: | | | |
| **Disability** | | | |
| The Equality Act 2010 strengthens the protection of disabled people from discrimination in all areas of employment, including recruitment. SIL welcomes people with disabilities and will do our best to make adjustments to the working arrangements and/or the working environment provided it is reasonable in all the circumstance to do so.  Do you have a disability you wish us to know about at this stage: Yes/No  In support of your application, please let us know if you believe there are any reasonable adjustments we can make to assist you with your application: | | | |

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| **Your Education** | | | |
| Please give details of schools, colleges, university or there institutions attended. Start with the most recent and work backwards. Continue on a separate sheet if necessary and attach to this page | | | |
| Name and address of School/College University | Qualification Level | Grades Achieved | Dates From: To |
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| **Your Training** | | |
| Please list all professional qualifications and training that you have undertaken including any relevant short course or in house training. Please start with the most recent. | | |
| Training/ Qualification | Date Completed | Grade |
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| **Current Employment** | | |
| Name, address, email and telephone of present or most recent employer inc. postcode if known | Position held, date started and date left (if applicable | Reason for leaving/wanting to leave |
| Description of role and responsibilities | | |
| Period of Notice Required: | | |

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| **Previous Employment: Please Start With The Most Recent** | | | | |
| Name, address, email and telephone of present or most recent employer Inc. postcode if known | Position held, date started and date left | | Reason for leaving | |
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| **Application Questions** | | | | |
| **Why do you think you would make a good Support Worker?** | | | | |
| **Please provide an example of when you have provided excellent support to an individual? Please note that your answer can be from your experience in employment, education or your personal life:**  **What was the situation?**  **What did you do?**  **What was the outcome?** | | | | |
| **References** | | | |
| Please give names and addresses of two referees (they should be your last / most recent employer/ school educational institute if applicable): | | | |
| Referee 1: | | Referee 2: | |
| Name | | Name | |
| Address  Postcode | | Address  Postcode | |
| Position Held: | | Position Held: | |
| Relationship: | | Relationship: | |
| Email Address/Telephone Number: | | Email Address/Telephone Number: | |
| It is company policy to contact shortlisted applicants referee’s before interviews please tick this box if you do not wish your referee to be contacted before interview | | It is company policy to contact shortlisted applicants referee’s before interviews please tick this box if you do not wish your referee to be contacted before interview | |

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| **Convictions and Cautions:** | | |
| **Rehabilitation of Offenders Act (1974)**  In order to protect Vulnerable Service Users it is necessary for checks to be made on all employees.  If you are applying to work with either children or vulnerable adults the work you are applying for is exempt from the provision of the Rehabilitation of Offenders Act. You are therefore required to disclose details of any conviction including ‘spent’ convictions. If you are applying for a role that is not with vulnerable adults or children then you need to declare any ‘unspent’ convictions. Having a conviction will not necessarily bar you from working with SIL.  Have you ever been convicted for any offence or had formal cautions by police for any offence or any bind overs imposed by any court (Any information given will be kept confidential)  YES/ NO If YES please enter details below | | |
| Date | Offence / Alleged Offence | Result (if Known) |
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| **Declaration** |
| I declare that the information I have provided is true and complete to the best of my knowledge and belief. I understand if I have knowingly made a false statement or deliberate omission in the information I have provided in this form, I may be disqualified from appointment on this or any future occasion, and/or maybe liable to disciplinary action.  **I agree with the above statement**  Name:  Signed:  Date: |