

Please fill in this Application Form; it is split into two parts: Part A and Part B. Please fill in both parts of the form and check it carefully before sending. Please note that questions marked with an asterisk '*' are mandatory and therefore must be answered.

APPLICATION FOR EMPLOYMENT WITH

HENGOED PARK CARE



APPLICATION FOR EMPLOYMENT – PART A

Date of Application	
Job Title	
Department	

Personal Details

* Surname/Family Name			
* First Names			
Title		* Date of Birth	
UK National Insurance No.		* Gender	Male Female I do not wish to disclose my gender
* Address			
Email address			
* Post Code		* Country	
Home Telephone		Mobile Telephone	
Work Telephone		May we contact you At work ?	
* Do you need a UK work permit to do this job under the terms of the Immigration and Asylum Act 1996 ?			
No, I do not need a UK work permit		Yes, I need a UK work permit	
No, I have a UK Training & Work Experience permit			
Details of any permit currently held:			
Are you a Department of Work & Pensions New Deal candidate ?		YES / NO	

Race Relations (Amendment) Act 2000

As Private Sector Employers, Hengoed Park is required to collect details about an applicant's ethnicity. This information is collected to fulfil that obligation and is used for monitoring purposes only.

* I would describe my ethnic origin as follows:-		
<p>Asian or Asian British</p> <p>Bangladeshi Indian Pakistani Any other Asian background</p>	<p>Mixed</p> <p>White & Asian White & Black African White & Black Caribbean any other mixed background</p>	<p>Other Ethnic Group</p> <p>Chinese any other ethnic group</p>
<p>Black or Black British</p> <p>African Caribbean Any other Black background</p>	<p>White</p> <p>British Irish any other White background</p>	<p>I do not wish to disclose my ethnic origin</p>

Employment Equality Regulations 2003

In order to comply with these regulations Hengoed Park Employers are monitoring sexual orientation and religion/belief in applications.

* Do you have a sexual orientation towards:-		
Persons of the same sex YES/NO	Persons of the same and opposite sex YES/NO	
Persons of the opposite sex YES/NO	I do not wish to disclose my sexual orientation	
* Please indicate your religion or belief:-		
Atheism Buddhism Christianity	Islam Jainism Judaism	Other I do not wish to disclose my religion

Disability Discrimination Act 1995

Under the terms of the Act a disability is defined as a 'physical or mental impairment which has a substantial and long term effect on a person's ability to carry out normal day to day activities'.

* Do you consider yourself disabled ?	YES / NO / UNDISCLOSED
If yes, do you need special arrangements to enable you to attend for interview ?	YES / NO
If so, please give details:-	

Rehabilitation of Offenders Act

In order to protect certain vulnerable groups within society, there are a number of posts and professions that are exempt from the provisions of the Rehabilitation of Offenders Act 1974. These include posts where, in the normal course of their duties, successful applicants will have access to persons in receipt of health services. If the post you have applied for falls within the above category, it will be exempt from the provisions of the Rehabilitation of Offenders Act by virtue of the Rehabilitation of Offenders Act (Exceptions Order) 1975.

Applicants are, therefore, not entitled to withhold information about convictions which for other purposes are 'Spent' under the provisions of the act and in the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action by the employing organisation. Any information given will be confidential and will be considered only in relation to posts to which the order applies.

* Have you at any time received, or had Pending, a court conviction ?	YES / NO
If so, 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.

DECLARATION

The information in this form (parts A&B) is true and complete. I agree that any deliberate omission, 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

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		
Grade			Salary
Reporting to (Job Title)			Period of Notice
Reason for leaving (if applicable)			
Description of your duties and responsibilities			

Previous Employment

Please record below the details of your previous employment beginning with the most recent first. Please explain any gaps in employment in the "Supporting Information" section below. 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 Employer 2

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

Previous Employer 3

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

Supporting Information

In this section please give your reasons for applying for this post and additional information which shows how you match the person specification for the job (you will have been sent this document with this application form). This can include relevant skills, knowledge, experience, voluntary activities and training etc.,

Supporting information (please continue on additional sheets if necessary)

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 your two most recent employers. 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. All referees will be approached prior to interview unless you indicate otherwise.

Referee 1

* Name			
Job Title			
* Address			
* Postcode		* Country	
Telephone		Fax	
Email			
* Relationship		* Can the referee be approached prior to the interview ?	YES / NO

Referee 2

* Name			
Job Title			
* Address			
* Postcode		* Country	
Telephone		Fax	
Email			
* Relationship		* Can the referee be approached prior to the interview ?	YES / NO

Referee 3

* Name			
Job Title			
* Address			
* Postcode		* Country	
Telephone		Fax	
Email			
* Relationship		* Can the referee be approached prior to the interview ?	YES / NO

PLEASE RETURN ALL APPLICATION FORMS TO:

**The Manager
Hengoed Park Ltd
Hengoed
OSWESTRY
Shropshire
SY10 7EE**

Tel: 01691 658411