



Saint Gabriel Healthcare Services LLC

Please complete all fields in black or blue ink and using block capitals. If you need any help, please contact us.

Part One – Your Personal Details

Title (Mr, Mrs etc.)	<input type="text"/>	Sex	Female <input type="checkbox"/>	Male <input type="checkbox"/>
First name	<input type="text"/>	Last name	<input type="text"/>	
Address	<input type="text"/>			
	<input type="text"/>			
	<input type="text"/>			
Post code	<input type="text"/>			
	<input type="text"/>			
Phone	<input type="text"/>			
Other phone	<input type="text"/>			
Email address	<input type="text"/>			

How did you hear about this job?(Tick where appropriate)

Google	Other search engine	Our website
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
www.saintgabrielhs.com	<u>www.saintgabrielhs.com</u>	Other website
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friend	Word of mouth	Other (please specify)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you were told about this job by someone that works for us, please tell us their name:

Do any other of your close friends or relatives already work for us? Yes ☐ No ☐

If you answered 'yes', please give their names here:

Can you prove that you are legally entitled to work in the US? Yes ☐ No ☐

If you answered 'yes', what document/s will you provide to prove this?

Have you worked recently in such a similar or almost similar role?

Yes ☐
No ☐

Part Two – Your Availability

It is really important to us that we know when you are available for work so please do your best to ensure that the information you provide in this section is correct.

What is the earliest date you could start work with us?

Do you have any holidays etc. already booked? Yes /...../.....
☐ - please give dates below No ☐

Please tick here to indicate when you would usually be available for work:

	Morning	Midday	Afternoon	Evening
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

Is there anything else we should know about your availability?

Part Three – Your Skills and Qualifications

Please tell us about the languages you can speak and/or write:

Language	Can Speak	Can Write	Basic	My level of skill is	
				Competent	Advanced
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Have you completed the Care Certificate? Yes ☐ No ☐

If you answered 'yes' above, you must provide a certificate or other evidence of completion.

Please tell us about any other relevant formal qualifications you have achieved :

.....

.....

.....

When did you leave full-time education? Month _____ Year _____

Part Four – Your work history

We are required by law to make sure we know about the work you have done in the past, as well as the periods you may have spent out of employment. Therefore, please list your **full** employment history here, including any periods when you were not working (along with an explanation of what you were doing). You may use extra sheets if you need more space.

Please **start with your current or most recent employment and work backwards**.

From (month and year)	To (month and year)	Employer and location (or educational establishment)	Your job role (or, if studying, your course)	Why you left (if applicable)
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Part Five – Your Referees

Please provide the details of **four** people that we can write to for a reference. The first of these people **must** be your current or most recent employer. The other referees will ideally also be your most recent previous employers.

If you cannot provide the details of four previous employers, you may substitute one or more of these with a referee who was a former tutor or teacher when you were in formal education. If you cannot provide details of a teacher or tutor, we may accept a personal reference from a person of professional standing (e.g. a doctor, lawyer, accountant, recognized religious leader or teacher) who knows you, either professionally or personally.

You must not give the names of friends or relatives or colleagues that are/were not senior to you as referees. All references will be verified.

First referee

Referee's name

Position

Name of organization, school or college

Address and post code

Phone

Email

Dates of employment or study

month
year

to

month
year

Second referee

Referee's name

Position

Name of organization, school or college

Address and post code

Phone

Email

Dates of employment or study

month
year

to

month
year

Third referee

Referee's name

Position

Name of organization, school or college

Address and post code

Phone

Email

Dates of employment or study

month
year

to

month
year

Fourth referee

Referee's name

Position

Name of organization, school or college

Address and post code

Phone

Email

Dates of employment or study

month
year

to

month
year

Part Seven – Suitability for The Job

Please read the care worker job description and answer the following questions.

Have you read and understood the worker job description?

Yes ☐

The position for which you are applying requires physical effort (including sitting, standing, carrying, walking, moving and handling people), mental effort (including dealing with emergencies and short-notice changes to work in a fast-paced environment) and possible emotional/psychological effort (including dealing with bereavement and challenging behavior in a potentially stressful environment)

Do you have any health conditions that would prevent you from meeting these intrinsic requirements for which the company might need to make reasonable adjustments? (If yes, please be aware that we may need to discuss these with you at your interview)

Yes ☐ No ☐

If you answered 'yes', please provide brief details:

Part Eight – Declarations

Please read the following statements carefully. If there is anything you do not understand, **please ask before you sign at the bottom of the page.**

I, the job applicant named on the front of this form, confirm that the information I have given in this application is accurate and true to the best of my knowledge. I also understand and agree that:

- ☐ The company may make checks to verify the information I have provided;
- ☐ Providing misleading or false information in this form or at any other time during the application process may disqualify me from appointment or, if I have already been appointed, may result in my dismissal;
- ☐ The personal information I have provided in this form (and any other personal information that I or my referees may provide) is confidential and will be handled in line with the Data Protection Act 1998;
- ☐ The company will use the personal information I have provided to decide if I am suitable for the job I have applied for;
- ☐ Until I am employed, the company will not use my personal information for any purpose other than monitoring its own recruitment processes and that if the company does use my personal information for statistical analysis, it will be anonymised;
- ☐ If my application is unsuccessful, the company will keep only basic information about me and destroy the rest;
- ☐ If my application is successful, my personal information will be used for legitimate purposes in relation to my work (my contract of employment, which I will sign before I start work, will include further detail on how my information may be used);
- ☐ The company may process my personal information for the purposes described above or as otherwise permitted or required by law in line with its registration with the Information Commissioner;
- ☐ Any offer of employment will depend on the receipt of satisfactory employment references and the satisfactory completion of a criminal records disclosure;
- ☐ I will be liable for the cost of my initial criminal records disclosure but that the company will bear the cost of any future disclosures that need to be made;
- ☐ I will be required to complete a pre-employment induction training program prior to my starting work with the company;
- ☐ My attendance on the induction training program will not indicate any offer (on the part of the company) or acceptance (on my part) of employment and that the time I spend on the induction program will therefore not count as working time for the purposes of calculating the company's compliance with National Minimum Wage regulations;

Signed _____

Dated/...../.....

This page is for official use only

Application form assessed by:

Name

Position

On the basis of the completed application form, is the applicant suitable to progress to a selection interview?

Yes ☐

No ☐

If 'no', please explain why:

.....

.....

.....

.....

.....

Please ensure an **applicant rejection letter** is sent to any unsuccessful candidate.

Successful applicants should be invited to an interview (a letter template is provided for this purpose).

Signed

Dated/...../.....

Additional notes:

This image shows a full page of white paper with horizontal dotted lines, typical of primary school writing paper. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.