# TL Care Services JOB APPLICATION FORM





# TL Care Services Ltd Application guide

This guide is designed to help you with application process. This application form plays an important role in determining whether or not you qualify for the next stage of the recruitment process. Please read the following information carefully before proceeding further.

## **The Person Specification**

- The person specification contains the experience, knowledge, skills and qualifications that are required. It is important to include these on your application form
- Think of any experience that you have acquired through volunteer work, community activities, or any informal experience (looked after family, friend)

## **The Job Description**

- The job description explains the duties that you will be involved in and expected to carry out on daily basis
- Check if this is the role you are interested in and will you want to pursue as a career

# **Employment History**

- List your work history, start from your most recent employment and write in chronological order.
- Make sure that any gaps in employment are explained with reasons
- Ensure you write the correct dates of your employment (include both start and finish)

### **Additional Information Sheet**

- · Write about your experience that is relevant to the post you are applying for
- Refer to the person specification and job description- you should relate your experience to those. You can refer to formal or informal experience
- Write in a positive manner, show your experience, skills and suitability for the post

# **Ensure that you:**

- Type or hand write your application form clearly using black ink remembering to sign the form
- Email your form to us, or post it back to the address indicated on the form/letter

#### **PERSONAL DETAILS**



POST APPL	.IED FOR:													
Title:														
Surname:				First	t Name(	(s):								
Address:														
Home tel. number:					Mobile Numb		l.							
Email addre	ess:													
National Ins	surance									Work permit Required:	YES	3	NO	
Full UK driv	ing licens	e:	<u> </u>							Access to car For work:	YES	3	NO	
Languages	spoken:													
How did you	<b>/</b> :	out												
Next of kin	name:					r	「el numb Email							
A !! = l= !!!4	Marriage	1	, T.	ation a	l E									
Availability Monday	Morning	Luncl	n re	atime	Evenir	ıg			_	ours are you rk per week?				
Tuesday										ning else we shou	ld			
Wednesday										our availability?				
Thursday							Are there any other restrictions or							
Friday							Activities that will limit your availability?							
Saturday							Do y	ou ha	ave	any holidays				
Sunday							pre-l	ooke	ed?					
Have you ev  If YES, pleas outcome:				iplinary	/ proces	s b	y you	r pre	viou	us employer?	YES		NO	

#### **EDUCATION/QUALIFICATIONS/TRAINING**

Please give details about qualifications gained - continue on a separate sheet where necessary:



EDUCATION / QUA	LIFICATIONS				
Schools attended		Date	Qualifi	cation an	d Grade
TRAINING (If you	have completed any relevant train	ing to this	post ple	ease give	details)
Training Body and	Course details	Date	Qualifi	cation ac	hieved
		•			
EMPLOYMENT BA	CKGROUND (please continue on a se	parate sheet	t if nece	ssary)	
CURRENT / MOCT	DECENT				
CURRENT / MOST JOB	RECENT				
Employer's name and address					
Job Title		Notice requi	red		
Reason for leaving					
Brief Description of Duties				Dates (m	onth & year)
or Duties				Erom	To



PREVIOUS E	MPLOYMENT (PAID AND VOLUNTARY)		•	- 1
Please detail th	e most recent first. Where there are gaps between			
education, fami	ly, child care, unemployment or travelling. Continu	ie on a separate	sheet if nece	ssary
Employer's				FOR OFFICE
name and				USE ONLY
address		Reason for	leaving	
				Con in
				Gap in Employment?
Job Title				Yes No
Brief Descript	tion of Duties :			If Yes, give
		Dates (month	& year)	reason
		From	То	
Employer's				FOR OFFICE
name and		Reason for	leaving	FOR OFFICE USE ONLY
		Reason for	leaving	
name and		Reason for	leaving	
name and address		Reason for	leaving	USE ONLY  Gap in Employment?
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name and address  Job Title  Brief Descript  Employer's name and address  Job Title	tion of Duties :	Dates (month	& year) To leaving	Gap in Employment? Yes No If Yes, give reason  FOR OFFICE USE ONLY  Gap in Employment?



	То	
From		

#### **REFERENCES:**

Please provide us with details of two references, one of which **must** be your present or most recent employer. The other referee will ideally be your most recent previous employer.

If you cannot provide us details of your previous employer, you may substitute it from the person of professional standing (e.g. a lawyer, accountant, doctor, teacher, recognised religious leader) who knows you, either professionally or personally.

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

Name :			FOR OFFICE USE ONLY
Position :			Date refs sent:
Organisation :			//201
Address:			Date refs received:
			//201
			Verified by:
Tel Number :		Email:	
Compositor in culti-	la Ala a a la a a a a a a a a a a a a a		Date refs verified:
	h they know you:		1 1004
May we contact	this reference prior to	interview?	/201
			FOR OFFICE
Name :			USE ONLY
Position :			Date refs sent:
Organisation :			/201
Address:			Date refs received:
			/201
			Verified by:



Tel Number :		Email:	
Capacity in whic	h they know you:		Date refs verified:
May we contact t	this reference prior to	interview?	//201



#### SHORT LISTING INFORMATION

Skills and Abilities/ Knowledge & Experience/ Qualities

This is an important part of the application.

Please provide a brief description of how did you overcome a challenge that you handled in work environment or in your personal experience.				

Please continue on a separate sheet if necessary

Tell us why you are applying for this job. You should also show how you meet the requirements of the person specification by providing details of your experience, skills & knowledge gained in employment, voluntary work or elsewhere.



Please continue on a separate sheet if necessary	

Please indicate if you have suffered from any of the following ailments and give details of any current medication or treatment and date of last related condition.

Ailment	Yes	No	Description
Headaches			
Blackouts			
Backache			
Heart/Blood Pressure			
Rheumatism/Arthritis			
Allergies			
Infectious Disease			
Respiratory Problems			
Visionary Problem			
Hearing Loss			
Mental Illness			
Stress Related Illness			
Recurring Chronic Illness			
Any Other Condition			
Do you suffer from any injury, illness, medical condition			
or allergy that might affect your ability to perform your duties? If Yes, please give further details.			
Are you currently on medication (excluding			
contraceptives)? If YES, please give further details.			
Have you been off sick in the last 12 months of your			
employment? If Yes, you must give details on how			
many days and how many times you were off sick.			

#### Rehabilitation of Offenders Act 1974

As an organisation assessing applicants'suitability for the roles that are included in Rehabilitation of

Offenders Act 1974 (Exceptions) Order using criminal records checks processed through the Disclosure and Barring Service (DBS), we comply fully with the Code of Practice and undertake to treat all the applicants for positions fairly.

The position that you have applied for involves working with vulnerable people and we take the responsibility to protect them very seriously. Any details provided will be treated with confidentially and will not automatically exclude you from being considered for the vacancy.

Have you ever been convicted of a criminal offence or received a Police conditional discharge, bind-over, caution, warning or reprimand?	Yes		No	
Have you ever been issued with a Penalty Notice for Disorder?	Yes		No	
If so, what was the offence?	Da	e:		

#### You must write a statement on a separate sheet with full explanation of any offence(s).

Making a false statement or any attempt to conceal information regarding this declaration will lead to the rejection of your application for employment with this company. Any details provided will be treated in the strictest confidence and will not automatically exclude anyone from being considered for any vacancy.

#### **DECLARATION**

I have completed an Application for a Criminal Disclosure and can further state that to the best of my knowledge and belief, there will not be any positive disclosure made that will preclude me from working with vulnerable adults or children.

I also give permission for a copy of the disclosure to which I am subject, being made available to a named Authorised Person upon written request, who acts on behalf of a National Government or Local Government Department for auditing purposes.

Print Name:	
Signature:	
Date:	

**DECLARATION** 

Please read the following statements have read them. If you don't please ask the team before signing and agree that:



# carefully and tick as you understand anything, this form. I understand

 All the information given is true and I information may result in my removal from TLCareservices; understand that any false or misleading

- O I confirm that I am eligible to work in the UK;
- The company may make checks to verify the information I have provided;
- The information I have provided in this application form is confidential and will be handled in line with the Data Protection Act 1998;
- O I consent to processing of sensitive personal data in accordance with Data Protection Act 1998:
- The company will use the personal information I have provided to decide if I am suitable for the vacancy I have applied for;
- Until I am employed, TLCareservices will not use my personal information for any purpose other than monitoring its own recruitment processes
- 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;
- 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);
- Any offer of employment will depend on the satisfactory completion of a Disclosure and Barring Service (DBS):
- I will be liable for the cost of my initial Disclosure and Barring Service (DBS) check (£54) and 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 programme prior to my starting work with the company;
- O I consent to the processing of sensitive personal data as referred to on the front page of this form.

Print Name:	
Signature:	
Date:	



# **OFFICE USE ONLY:**

Application form assessed by:

Name:						
Position:						
Signature:						
					<del>,</del>	
Based on the completed application						
form, is the person successful to proceed with the interview?		Yes		No		
proceed with the	FIIILGI VIGW:				<u> </u>	
If 'No', please explain the reason						
why:						
Make sure a rejection letter is issued and sent to any unsuccessful applicant.						
Successful candidates should be invited to the interview and invitation letter needs to be sent out.						
0: 1						
Signed:						
D 1						
Date:						



Notes:	