

**ABBOTSFORD CARE (GLENROTHES) LTD****Confidential - Application for Employment**

Please type or write clearly (capital letters) in black ink and tick boxes as required

Position applied for:

**Personal Details**

<b>Title:</b>	<b>Forename(s):</b>	<b>Surname:</b>
<b>Address:</b>		
<b>Town:</b>	<b>Postcode:</b>	
<b>Home tel:</b>	<b>Mobile:</b>	
<b>E-mail:</b>	<b>Nationality:</b>	
<b>National Insurance Number:</b>		
<b>If appointed, when could you start work / what is your current notice period?</b>		

**How did you hear about this post? (tick all that apply)**

- Abbotsford Care Website
- Job centre
- Word of Mouth
- Social Media
- Previous Employee/Internal Advert
- TV/Radio /Newspaper Advert
- Jobs Board (Indeed)
- Other (please specify)  \_\_\_\_\_



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**Education & Membership of Professional Bodies****Secondary Education/Qualifications**

Institution name & address	Subject	Level (GCSE, Standard Grades, 'A' level etc.)	Grade

**Higher Education and Professional Qualifications obtained and currently being pursued**

University/College attended (name & address)	Course	Qualification achieved

**Membership of Professional Bodies (i.e. NMC / SSSC)**

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**Any other relevant education and training relevant to the position applying for**

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**Driving Information**

Do you hold a UK driving licence?

Yes  No 

If so, do you have access to your own vehicle?

Yes  No

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### Protection of Vulnerable Groups (PVG) Details

Are you currently a member of the PVG Scheme Yes  No

If so, please detail your PVG Membership Number:

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Please tick which part of the PVG register this is for:

Children  Protected Adult's  Both

Do you have access to your most current PVG certificate? Yes  No

### Other Relevant Information

Do you have any other connections with Abbotsford Care? (i.e. previous employee / have a relative working with us at present)

Yes  No

If so, please detail:

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Are you, or have you, worked for a healthcare agency?

Yes  No

If so, please details the name of the agency and dates of employment:

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Have you ever worked in any Abbotsford facility whilst working for an agency?

Yes  No

If so, please detail which Abbotsford facility and when:

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Please tick which of our care homes you would consider employment at:

- Milton House, Kirkcaldy
- Mina Lodge, Kinglassie
- Chambers Court, Cowdenbeath
- Tayside View, Newburgh
- Raith Manor, Kirkcaldy
- Strathburn Lodge, Glenrothes
- Castle Gait Manor, East Wemyss
- Bayview, Methil
- Headwell House, Dunfermline
- My preferred location would be:

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**ABBOTSFORD CARE (GLENROTHES) LTD****Confidential - Application for Employment****Employment Information**

Please give details of your employment (paid or unpaid) starting with your present/most recent employer and working backwards. You should explain any gaps in your employment history in the following section.

**Present or most recent employer**

Employer name:

Employer address:

Job title:

From (MM/YY):

To (MM/YY):

Current or final salary:

Period of notice required:

Reason for leaving:

Main responsibilities and duties:

**Previous employers**

Employer name:

Job title:

From (MM/YY):

To (MM/YY):

Reason for leaving:

Salary on leaving:

Please give a brief outline of your main responsibilities:

Employer name:

Job title:

From (MM/YY):

To (MM/YY):

Reason for leaving:

Salary on leaving:

Please give a brief outline of your main responsibilities:

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### Previous employers

<b>Employer name:</b>		
<b>Job title:</b>	<b>From (MM/YY):</b>	<b>To (MM/YY):</b>
<b>Reason for leaving:</b>		
<b>Salary on leaving:</b>		
<b>Please give a brief outline of your main responsibilities:</b>		

<b>Employer name:</b>		
<b>Job title:</b>	<b>From (MM/YY):</b>	<b>To (MM/YY):</b>
<b>Reason for leaving:</b>		
<b>Salary on leaving:</b>		
<b>Please give a brief outline of your main responsibilities:</b>		

<b>Employer name:</b>		
<b>Job title:</b>	<b>From (MM/YY):</b>	<b>To (MM/YY):</b>
<b>Reason for leaving:</b>		
<b>Salary on leaving:</b>		
<b>Please give a brief outline of your main responsibilities:</b>		

If you have had any breaks in your employment (e.g. travel, unemployment, illness, family commitments) please give the dates and reason(s).

<b>Date from:</b>		<b>Reason for break:</b>
<b>Date to:</b>		
<b>Date from:</b>		<b>Reason for break:</b>
<b>Date to:</b>		
<b>Date from:</b>		<b>Reason for break:</b>
<b>Date to:</b>		

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### References

Please provide details of two people we can approach for references. One must be your current or most recent employer; voluntary work or placement supervisor; a school, college or university tutor; or a youth leader. Referees cannot be family members or close friends.

<b>Name:</b>	<b>Name:</b>
<b>Address:</b>	<b>Address:</b>
<b>Tel:</b>	<b>Tel:</b>
<b>E-mail:</b>	<b>E-mail:</b>
<b>Occupation:</b>	<b>Occupation:</b>
<b>Relationship to you:</b>	<b>Relationship to you:</b>
<b>May we contact this referee prior to interview?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>May we contact this referee prior to interview?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>

### Personal Statement - Why are you applying for this position?

Please explain why you have applied for the position and in what way your skills, knowledge and experience match the requirements of the post. Please let us know details of any relevant training, interests or activities you feel would further support your application.

Please continue on a separate sheet if required

**ABBOTSFORD CARE (GLENROTHES) LTD****Confidential - Application for Employment****Eligibility to work in the UK**

Do you require a work permit to work in the UK?

Yes No 

If yes, what type of permit is it?

Date of issue:		Date of expiry:	
Visa number:		Passport number:	
Place of issue:			

To ensure compliance with Section 8 of the Asylum and Immigration Act 1996, all candidates will be required to proof of their eligibility to work within the UK at interview stage.

**Rehabilitation of Offenders Act, 1974**

Please provide details of **all** convictions of a criminal offence under the Rehabilitation of Offenders Act 1974 and the Rehabilitation of Offenders (Northern Ireland) Order 1978.

Date	Offence	Penalty

**Health**

Approximately how many days have you been absent due to illness over the last two years? Please detail and explain any absences of 5 working days or more:

**Declaration**

The personal information collected on this form will be used for the purposes of recruitment and selection for the role or roles you have applied for, or other roles you may be suitable for within Abbotsford Care (Glenrothes) Ltd and if appointed will form part of your employment record. The information will not be used for any other purpose nor will it be disclosed to any third party. Abbotsford Care (Glenrothes) Ltd will destroy all recruitment records three months after the closing date. **Please confirm by signing below that you give your consent for your information to be used by Abbotsford Care (Glenrothes) Ltd for recruitment purposes.**

**I confirm that the information given on this form is, to the best of my knowledge, true and complete.** I understand that any deliberate attempt to provide false information to obtain employment is a serious misrepresentation and will lead to rejection, or if employed, dismissal. I understand that if I am invited for interview any relevant criminal convictions may be discussed in order to assess job-related risks. Appropriate written details can be submitted separately in strict confidence to the Executive Director and will be held securely in compliance with the CRB Code of Practice.

Signed:	Date:
Print name:	

*If submitting an application by e-mail please type your name and the date. This, together with your attached e-mail will be deemed to form an electronic signature. Please be aware that you will subsequently be asked to sign a hardcopy of your application.*

**Confidential - Application for Employment****Equality Monitoring**

Abbotsford Care (Glenrothes) Ltd is committed to equality of opportunity for all job applicants and employees. In order to ensure we are meeting our aims, please answer the questions below and return this form with your application. This information is used solely for monitoring purposes and will not inform the selection process in accordance with the Data Protection Act 1998.

**Gender**

Please tick :

Male Female Prefer not to disclose **Date of Birth**

Date of Birth (dd/mm/yyyy):

**Ethnic Origin**

Please tick (or X) a box from the list below which best describes the ethnic group to which you belong:

<b>White</b>	British	<input type="checkbox"/>
	Irish	<input type="checkbox"/>
	Other White background	<input type="checkbox"/>
<b>Mixed Race</b>	White & Black Caribbean	<input type="checkbox"/>
	White & Black African	<input type="checkbox"/>
	White & Asian	<input type="checkbox"/>
	Other mixed background Please specify .....	<input type="checkbox"/>
<b>Asian or Asian British</b>	Indian	<input type="checkbox"/>
	Pakistani	<input type="checkbox"/>
	Bangladeshi	<input type="checkbox"/>
	Other Asian background Please specify .....	<input type="checkbox"/>
<b>Black or Black British</b>	Caribbean	<input type="checkbox"/>
	African	<input type="checkbox"/>
	Other Black background	<input type="checkbox"/>
	Please specify .....	<input type="checkbox"/>
<b>Chinese or other ethnic group</b>	Chinese	<input type="checkbox"/>
	Other	<input type="checkbox"/>
	Please specify.....	<input type="checkbox"/>
<b>I do not wish to identify my ethnic group at this stage</b>		<input type="checkbox"/>

**Disability****Do you consider yourself to have a disability?**Yes No 

As defined by the Disability Discrimination Act, 1995, a disability is: "A physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities". Abbotsford Care (Glenrothes) Ltd always interviews disabled applicants who have demonstrated that they meet all the essential requirements of the person specification for a role.

**If invited to interview, do you have any special requirements?**Yes No 

Thank you for providing this information.





If you have any difficulty completing this form please call Head Office on 01592-775558 and ask to speak to a Human Resources Officer. Our offices are open Monday to Friday, 9 am – 5.30 pm.

Please return your completed form via e-mail or post to:

- [recruitment@abbotsford-care.co.uk](mailto:recruitment@abbotsford-care.co.uk)
- **Abbotsford Care**  
**Head Office**  
**Strathburn Drive**  
**Glenrothes, Fife**  
**KY7 4UQ**

All successful applicants will be invited along to our next available recruitment event (we hold these events once a month) where we can tell you a little more about the positions we have available. Throughout our interview process we want to get to know you better and allow you to demonstrate your passion and skills, no matter what position you are applying for. You will have the opportunity to meet some of our Management and Administration Team as well as a few of our residents during our interview process.

Our preferred means of communication with candidates is via e-mail, therefore please ensure you provide us with a valid e-mail address. If you do not have access to an e-mail account, we will contact you by letter or telephone.

Abbotsford ensure that all applications are dealt with in a confidential manor and that our selection process is non-discriminative at all times. We receive a high volume of applications therefore if you do not hear back from us within 4 weeks of submitting your application, then unfortunately you have been unsuccessful.

