



Ascent Care, Training and Supplies Ltd.

Registered Office: Unit 2A, Sadd's Yard,
Skelmerdale Road, Clacton-on-Sea, Essex.

01255 434347 / 07508238148

admin@ascent-care.com www.ascent-care.com

Job Application Form

Position Applied for:

Reference:

Date:

A. Personal Details

Title: (Mr/Miss/Mrs/other): Surname: Forenames:

Address:

..... Postcode:

Telephone: Home: Mobile:

Email address:

Date of Birth: NI number :.....

Next of kin name: Relationship:

Address:

Contact / Phone:

Do you have Work/Resident permit to work in the United Kingdom? Yes / No:

Expiry: Other comments:

Do you drive or have the regular use of a car? (Yes / No).

Do you have a valid drivers' licence? (Yes/No).

Are you willing to travel for work? (Yes / No).

Do you have a current DBS? (Yes / No). Number:

Languages spoken: 1. _____ Fluent / can read / can write

2. _____ Fluent / can read / can write



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| B. Education/Relevant Professional Training | | | |
|--|-------------|-----------|------------------------------|
| School/College | Date | | Qualifications gained |
| | From | To | |
| • Secondary Education | | | |
| 1. | | | |
| 2. | | | |
| • Higher/Further Education | | | |
| 1. | | | |
| 2. | | | |
| 3. | | | |
| • Professional qualifications | | | |
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| Membership of Professional organisations | | | |
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |



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C. Employment History

Please give details of all employments and voluntary works in the past 10 years beginning with the most recent.

| Date | | Employer | Position held | Reason for leaving |
|------|----|----------|---------------|--------------------|
| From | To | | | |
| | | | | |

What is your preferred type of work?: Full time..... Part-time Bank

What are your preferred hours of work? Morning DayNight
(Please provide us with your availability at the beginning of each week if a Bank worker).

D. Payroll

| PAYE | Limited Company |
|-----------------|------------------------|
| Bank: | Company name: |
| Sort code: | Sort code: |
| Account number: | Account number: |
| | UTR number: |



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E. References

Please provide contact details of two referees whom we may contact to give references to support your application. One of these must be your most recent manager or employer. Friends and family members do not qualify.

1. Name:

Address:

.....

Telephone number: email:

Position:

2. Name:

Address:

.....

Telephone number: email:

Position:

Should we contact your referees before making a job offer? Yes:..... No:



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F. Employer Declaration

If the position you are applying for (whether paid or voluntary) is listed in Schedule 1, Part II of the Rehabilitation of Offenders Act (Exceptions) Order 1975, we are entitled to ask Exempted Questions as defined by Section 113(5) of the Police Act 1997 about you. If your application is successful and before your appointment is confirmed, you will be required to submit a personal, current, and valid DBS Certificate for our inspection.

Having a criminal record will not necessarily bar you from working with us. This will depend upon the nature of the position and the circumstances and background of your offences. We observe the "Code of Practice for Registered Persons and Other Recipients of Disclosure Information" published through the Disclosure & Barring Service on behalf of the Home Office, and we will provide you with a copy of it upon request.

Ascent Care, Training and Supplies Ltd. is an equal opportunity employer and complies with the Equality Act (2010). The sole criterion for selection of applicants will be suitability for the job position, regardless of gender, background, culture, religion, marital status, or disability.

Data Protection Act 1998: Your signature on this document gives us the right, under the Data Protection Act 1998 to process the information you have given, including data of a sensitive nature, relating to your application for employment. Any processing of the data by us will be in accordance with our Policy and the processing principles set out in the Act. Application forms of unsuccessful candidates will be destroyed after six months in accordance with our Record-keeping Policy.

Any person that is found to have knowingly supplied false or misleading information, or deliberately withhold relevant information, may be subject to disciplinary proceedings which may result in dismissal or prosecution.

G. Applicant Declaration

I have read and understood the information supplied to me in relation to this job position and the information requested in this Application Form. I confirm that all information supplied by me is true and correct to the best of my knowledge and belief as at the time of making this application.

I give the prospective employer the right to follow up all references and make any other necessary enquiries and verifications about me in relation to this application.

Name: Signature: Date: