

Return to: T.L.C. Home Care Services,
91 High Street,
Evesham,
Worcs, WR11 4DN

JOB APPLICATION FORM

Please give all requested information so that a full evaluation can be made of your application.
Details will be treated as confidential.

Application for the post of

1. Name in full (Mr/Mrs/Ms/Miss)
Maiden name: Previous names:
Present address:
.....
Permanent address (if different):
.....
Date of birth: Religion:..... Nationality:
Tel. No: I have my own transport: Yes/No

Arrangements which may affect your availability for work, e.g. college, family:
.....

2. Present or most recent job
Name & address of Employer
Employed as
Date of employment From: To:
Hours worked and rates of pay
Reason for leaving

Give details of previous employment with approximate dates:

Employer	Nature of Employment	From	To	Reason for leaving
.....
.....
.....
.....
.....

Number of hours applied for: Minimum number needed: Ideal number:
I can work mornings/lunch times/evenings/nights/weekends/overtime (delete as necessary).
(Please be aware your availability for work may affect the hours which may be available to you.)

3. Health – Care work is physically and, occasionally, emotionally demanding.
It is important that we ask basic details about your health record. You will be asked
to complete a medical questionnaire before interview.

What is the longest period of sickness absence you have had?
What was the cause of this absence?
How many days sickness have you had in the past 12 months?

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4. Please give below the full names and addresses of two referees (not relatives).
If recently employed, one must be your last employer.

a. Name of first referee
Address
.....
.....

Who has known me months / years. Can we approach this referee before
interview? YES / NO

b. Name of second referee
Address
.....
.....

Who has known me months / years. Can we approach this referee before
interview? YES / NO

5. I also have the following qualifications
.....
Courses attended in last 12 months
.....
.....
.....

6. Have you ever been convicted of a criminal offence? YES / NO

Please note that, because of the nature of the work for which you are applying, this post
is exempt from the provisions of the Rehabilitation of Offenders Act 1974 (Exemptions)
Order 1975.

You are therefore not entitled to withhold any information about convictions.
Any information given will be kept in strict confidence.

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NB. Employment with T.L.C. Home Care Services will be subject to a compulsory police
check.

DECLARATION

I declare to the best of my knowledge and belief the information given is true, and I understand
that employment will be considered subject to the particulars being correct.

Signed Date

National Insurance Number Bank/Building Society

Account Name and Number Sort Code