

Application Form

Clinical Services



It is an offence to apply for this position if you are barred from engaging in regulated activity relevant to children.

Position

Position applied for

Location

Personal details

Surname and Former names

Forename(s)

Address

Post code

Email address

Telephone no

Mobile no

Do you have a National Insurance number? **Yes** **No**

If yes, please provide your National Insurance Number

(Health, Psychology and Social Workers only) Are you subject to any sanctions or disqualifications issued by a regulatory body such as the HCPC (Health and Professions Council)? **Yes** **No**

Do you have a full manual UK driving licence to drive a car? **Yes** **No**

Details of any driving convictions

Education & training

School

Dates

Qualifications

College

Dates

Qualifications

University

Dates

Qualifications

Other training body

Dates

Qualifications

Please continue on a separate sheet if required.

Employment history

We require a full employment record with any gaps in employment explained in writing. Please list all previous employment since leaving school, commencing with the most recent employer. Please also include details of any voluntary work.

Employer's name

Employer's address

Job title

Salary

Date started (DD/MM/YY)

Date finished (DD/MM/YY)

Reason for leaving

Employer's name

Employer's address

Job title

Salary

Date started (DD/MM/YY)

Date finished (DD/MM/YY)

Reason for leaving

Employer's name

Employer's address

Job title

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Employment history

Employer's name

Employer's address

Job title

Salary

Date started (DD/MM/YY)

Date finished (DD/MM/YY)

Reason for leaving

Employer's name

Employer's address

Job title

Salary

Date started (DD/MM/YY)

Date finished (DD/MM/YY)

Reason for leaving

Please continue on a separate sheet if required.

Are there any gaps in your
employment history?

Yes

No

If yes, please explain below

Have you lived or worked abroad for
3 months or more in the last 10 years?

Yes

No

If yes, please provide details below

Notice

Please tell us your current notice period if applicable

References

Please provide contact details of your current employer from whom a reference will be sought. This must be from a Head Teacher, College Principal, Registered Manager, Chair of Governors or HR department and NOT from your line manager. If you have previously worked with children, young people or vulnerable adults, then please provide details for your second professional reference. The third referee should be a character reference who is not a member of your family and has known you for at least two years.

It is also necessary for us to contact all employers where you have previously worked with children, young people or vulnerable adults. Please refer to and complete section 2 of this form to confirm your authorisation for this safeguarding check.

Name of referee 1

Relationship/job title

Address & Postcode

Telephone no.
(Landline Only)

Email:

Name of referee 1

Relationship/job title

Address & Postcode

Telephone no.
(Landline Only)

Email:

Name of character referee

Relationship

Address

Telephone no.

Email:

Previous Employment Authorisation Form

If successful and offered a position, I authorise Witherslack Group to contact all previous employers regarding my period of employment working with vulnerable children and/or adults.

Yes

No

Please set out why you are applying for the position and what you think you can bring to the role.

You may wish to set out below the principal reason for your application.

Please also give a give a brief description of the skills and attributes you will bring to this position.

Where possible please relate these to the person specification.

Declaration

Please read this carefully before signing.

General Data Protection Regulation (EU 2016/679) & Data Protection Act 2018

Information provided by you on this information form may be copied for use during the on-boarding process for engagement. The information form and other relevant information obtained will form part of your database record.

I understand that if I offer my services the information submitted on my information form will form the basis of my contract with the Witherslack Group. If it is subsequently discovered that I have wilfully or negligently given false information or withheld information, Witherslack Group will have the right to terminate any agreement engagement.

Signed

Date

Privacy Notice: Your application form will be uploaded into our Networkx Applicant Tracking System, for details on how your information will be handled, please see our privacy notice which is available at www.witherslackgroup.co.uk/careers

It would assist us in monitoring the effectiveness of our advertising if you could indicate where you saw the post advertised.

Placement of advert

Please return completed form to:

Or e-mail your completed form to:



Recommend a Friend Scheme

Did you find out about this job from a friend who already works for Eagle House? If so, please let us know their name.

Name of Friend

Please also complete our Equal Opportunities questionnaire.