Reference Number: 2024SWCL/05

Logo

Description automatically generated with medium confidence

# APPLICATION FOR EMPLOYMENT

**Return by email to:** [**hr.talent@nwmm.co.uk**](mailto:hr.talent@nwmm.co.uk)

**JOB TITLE: Support Worker Clarendon Shelter**

#### CLOSING DATE: Friday 31st May 2024 @ 5pm

**Please indicate which role/s you wish to be considered for:**

**Full-time Bank Both**

**PERSONAL DETAILS**

Title (Mr, Mrs, Miss, Ms, Dr):

Forename(s):

Surname:

Address:

Postcode:

Telephone:

Email:

**Please note that all correspondence to you in relation to this vacancy will be sent to the email address provided above.**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |

National Insurance Number:

(Please Ö appropriate box)

Do you require a permit to work in the UK? Yes No

Do you hold a current full driving licence valid in the UK? Yes No

(Desirable)

If required, do you have access to a car, or if disabled access to a

form of transport, which will enable you to fulfil the duties of the post?

Yes No

Do you suffer from any serious illness or disability? Yes No

If yes, please give details;

Are there any reasonable adjustments that you require under DDA for attending interview and or taking up this post?

**EDUCATION – GCSE, A-Level, NVQ, Degree, Apprenticeship, or equivalent**

|  |  |  |  |
| --- | --- | --- | --- |
| Examining Body | Level/Subject of Exam | Grade Achieved | Date |
|  | | | |

**EMPLOYMENT HISTORY – PRESENT OR MOST RECENT POST**

Job Title:

Summary of main

Duties:

Employment Dates:

From To

Employer Name/

Address:

Reason for Leaving:

**EMPLOYMENT HISTORY – PREVIOUS POSITIONS**

Job Title:

Summary of main

Duties:

From To

Employment Dates:

Employer Name/

Address:

Reason for Leaving:

**EMPLOYMENT HISTORY – PREVIOUS POSITIONS**

Job Title:

Summary of main

Duties:

Employment Dates:

From To

Employer Name/

Address:

Reason for Leaving:

**EMPLOYMENT HISTORY – PREVIOUS POSITIONS**

Job Title:

Summary of main

Duties:

Employment Dates:

From To

Employer Name/

Address:

Reason for Leaving:

Continue on a separate sheet if necessary.

Please provide details of any absences from work in the last 2 years, the reasons and duration.

#### RELEVANT TRAINING

|  |  |
| --- | --- |
| Relevant Training Courses/Awards | Date |
|  |  |

**ESSENTIAL CRITERIA**

This information will be used by a selection panel to decide whether, or not you will be short listed for interview. Please state how you satisfy each of the essential criteria.

|  |
| --- |
| **(1)a** A minimum of 1 years paid experience in a formal care/support role. |

|  |
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| **(1)b** Essential Skills Level 2 Communication and Application of Number, or equivalent;  **OR**  NVQ Level 2 Health and Social Care, or equivalent; |

**(1)c If the above qualifications are not held**

Be prepared to complete a relevant qualification within 12 months of appointment **AND** Minimum 2 years’ experience in a formal care/support role.

|  |
| --- |
| **(2)** Proficient in the use of Microsoft Office applications. |
| **(3)** Effective communication and interpersonal skills. |

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| **(4)** Do you have the ability and willingness to work to a rota that includes day shifts and waking night shifts, covering weekdays and weekends?  Yes  No |

**DESIRABLE CRITERIA**

This information may be used by a selection panel to decide whether or not you will be short listed for interview. Please state how you satisfy each of the desirable criteria.

|  |
| --- |
| **(1)** Previous experience providing support in a residential setting. |

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| **(2)** Knowledge of safeguarding adults (and children where appropriate) at risk. |

**CRIMINAL CONVICTIONS**

|  |
| --- |
| Disclosure of a conviction does not necessarily debar any applicant from obtaining employment. Under The 1979 Rehabilitation Offenders (Exemption) Order (as amended) no convictions can be regarded as spent and must be disclosed. S**uccessful applicants will undergo an AccessNI Check before any appointment is confirmed.**  Do you have any convictions, cautions or bind-over orders in relation to any offence(s)?  Yes No  If yes, please provide full details of the offence(s): |

**REFEREES**

Please nominate two referees (not relatives) at least one of whom should have knowledge of your present or most recent work in a supervisory/managerial capacity.

|  |  |
| --- | --- |
| Name:  Occupation:  Address:  Postcode:  Telephone:  Email:  Capacity in which this person knows you: | Name:  Occupation:  Address:  Postcode:  Telephone:  Email:  Capacity in which this person knows you: |

**PERSONAL DECLARATION**

Please read this carefully before signing this application.

1. I declare that all the foregoing statements are true, complete and accurate.
2. I understand that if I give wrong information or leave out important information I could be dismissed if I take up this job.
3. I understand that to take up this job I must have satisfactory references.
4. I understand that I will be asked to provide formal identification and evidence of qualifications relied on.
5. I confirm that as far as I know there are no medical reasons which would prevent me from carrying out the duties of this post.
6. Within the context of the General Data Protection Regulations, I consent to my personal data being used for recruitment and selection purposes and being retained during employment if I am successful.

**Electronically Signed: Date:**

Return with the Equal Opportunities Monitoring Form by email to: [hr.talent@nwmm.co.uk](mailto:hr.talent@nwmm.co.uk)

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