** APPLICATION FORM**

**77 Eglantine Avenue**

**Belfast**

**BT9 6EW 02890663566 info@primecareni.com**

**Primecareni.com**

HOME TELEPHONE

YES NO

YES NO

YES NO

**PERSONAL DETAILS**

**POSITION APPLIED FOR**

FULL TIME PART-TIME DAYS & EVENINGS OVER NIGHTS

HOURS SITS

YES NO

FIRST NAME SURNAME

ADDRESS

Postcode

MOBILE NUMBER

EMAIL ADDRESS

NATIONAL INSURANCE NUMBER

DO YOU HOLD A FULL & CURRENT DRIVING LICENCE?

DO YOU HAVE A CAR FOR WORK?

DO YOU HAVE ‘BUSINESS USE’ CAR INSURANCE?

DO YOU NEED A WORK PERMIT TO WORK IN THE UK?

IF YES, PLEASE DETAIL CURRENT STATUS OF WORK PERMIT/VISA & REGISTRATION STATUS WITH HOME OFFICE

**SUBJECT LEVEL**

**SCHOOL/COLLEGE SUBJECT LEVEL GRADE YEAR**

**YOU CANNOT LEAVE THIS SECTION BLANK**

**EDUCATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| NAME & ADDRESS OF EMPLOYER XCVVSVSDVSDSDFSD | POSITION HELD | DUTIES/  RESPONSIBILITES | REASON FOR LEAVING | EMPLOYED FROM: **MONTH & YEAR** | EMPLOYED TO**: MONTH & YEAR** |
| 1, (MOST RECENT OR CURRENT JOB) |  |  |  | \_\_\_\_/\_\_\_\_\_\_ | \_\_\_\_/\_\_\_\_\_\_ |
| 2, |  |  |  | \_\_\_\_/\_\_\_\_\_\_ | \_\_\_\_/\_\_\_\_\_\_ |
| 3, |  |  |  | \_\_\_\_/\_\_\_\_\_\_ | \_\_\_\_/\_\_\_\_\_\_ |
| 4, |  |  |  | \_\_\_\_/\_\_\_\_\_\_ | \_\_\_\_/\_\_\_\_\_\_ |
| 5, |  |  |  | \_\_\_\_/\_\_\_\_\_\_ | \_\_\_\_/\_\_\_\_\_\_ |

PLEASE CONTINUE ON A BLANK SHEET OF PAPER IF NESSESSARY & ATTACH WITH THIS FORM. WE REQUIRE ALL EMPLOYMENT HISTORY FROM YOU WERE 18 YEARS OLD. ANY GAPS IN EMPLOYMENT MUST BE FILLED IN ON PAGE 5.

**PLEASE NOTE ACCURATE EMPLOYMENT DATES MUST BE FILLED IN INCLIUDING THE YEAR AND MONTH**

**COMPLETE EMPLOYMENT HISTORY (FROM 18 YEARS OLD)**

I AM NOT CURRENTLY EMPLOYED  **PLEASE GO TO THE NEXT SECTION**

NAME & ADDRESS OF EMPLOYER

JOB TITLE

LOCATION SALARY

START DATE NOTICE PERIOD

BRIEF DECRIPTION OF DUTIES

HAVE YOU EVER BEEN DISMISSED FROM ANY EMPLOYMENT? Y  N (if YES detail below)

**PERFORMANCE**

**CURRENT EMPLOYMENT**

**IT IS REQUIRED THAT ANY GAPS IN EMPLOYMENT ARE RECORDED.**

I HAVE NO GAPS IN EMPLOYMENT I HAVE GAPS IN MY EMPLOYMENT 

DATE FROM DATE TO REASON FOR GAP IN EMPLOYMENT

ADDITIONAL INFORMATION

**GAPS IN EMPLOYMENT**

**REFERENCES**

ONE REFERENCE MUST BE FROM YOUR **MOST RECENT EMPLOYER.** FRIENDS OR RELATIVES CANNOT NOT BE USED.

COMPANY NAME:

ADDRESS:

TEL NO :

EMAIL:

**2ND REFERENCE 3RD REFERENCE**

NAME/COMPANY: NAME/COMPANY:

 

POSITION: POSITION:

 

ADDRESS: ADDRESS:

 

TEL NO: TEL NO:

 

EMAIL: EMAIL:

 

I AGREE FOR MY REFERENCES TO BE CONTACTED IF I AM SUCCESSFUL IN MY APPLICATION

PLEASE NOTE REFERENCES WILL ONLY BE CONTACTED AFTER A SUCCESSFUL INTERVIEW

SIGN: DATE:

 

**AMMENDMENTS/CHANGES TO APPLICATION FORM (OFFICE USE ONLY)**

HOW DID YOU HEAR ABOUT THIS VACANCY? (PLEASE CIRCLE)

FACEBOOK

OTHER:



NEXT OF KIN NAME



RELATIONSHIP TO YOU



NOK ADDRESS



NOK TEL NO.



PLEASE CONFIRM ANY REGISTRATION WITH ANY REGULATORY BODIES (E.G. NISCC)

REGISTERED YES  NO 

NAME OF REGISTERED BODY



DATE OF REGISTRATION



**FURTHER DETAILS**

**Rehabilitation of Offenders (NI) Order 1978 & Rehabilitation of Offenders (Exceptions) Order 1979.** By virtue of the Rehabilitation of Offenders (exceptions) Order 1979 and because of the nature of the work for which you are applying, this post is exempt for the previous of Article 5 of the Rehabilitation of Offenders (N.I.) Order 1978.

Accordingly you are not entitled to withhold information about convictions which you would otherwise be considered as “spent” under the provisions of the 1978 Order. Failure to disclose such information could result in termination of an offer of employment. **A more detailed guide to the Order is available from the Northern Ireland Office.**

The post for which you have applied involves a substantial access to vulnerable children and adults. Before appointing anyone to such a post, it is our policy to ask for an enhanced check with barred list to be carried out by Access NI. The purpose of the check is to make sure that people not appointed who might be a risk to vulnerable children and adults.

The check will then let us know whether you have a criminal record, or whether Access NI holds any other information about you which might have a bearing on your suitability. Any information which we receive will be treated confidentially, and will be discussed with you before we make a final decision. A criminal record will not necessarily be a bar to obtaining a position*.* Prime Care has a Recruitment of Ex Offenders Policy which is available on request. AccessNI’s Code of Practice, setting out these arrangements, is available at https://www.nidirect.gov.uk/publications/accessni-code-practice

We only ask for the check if your application is successful and we are thinking of appointing you. However you must tell us now if you have ever been convicted of a criminal offence, or cautioned by police, or bound over. You must include all offences, even minor matters eg motoring offences and “spent” convictions, that is, things which might have happened a long time ago. If you leave anything out it may affect your application. Please note that if you do not consent to an Access NI enhanced with barred list check, we will not accept your application.

DO YOU HAVE ANY PROSECUTIONS PENDING? YES NO

HAVE YOU EVER BEEN CONVICTED AT A COURT OR CAUTIONED BY THE YES NO

POLICE FOR ANY OFFENCE?

HAVE YOU EVER BEEN INVOLVED IN AN ABUSE CASE, OR HAVE YOU EVER YES NO

BEEN INVOLVED IN A POLICE INVESTIGATION REGARDING ABUSE?

IF YES, PLEASE DETAIL BELOW ALL PENDING PROSECUTIONS, CONVICTIONS, CAUTIONS OR BINDOVER ORDERS.

INCLUDE AS MUCH INFORMATION AS POSSIBLE INCLUDING DATES AND THE OFFENCE AND COURTS INVOLVED.

IS THERE ANY REASON YOU CANNOT WORK WITH VULNERABLE CHILDREN OR ADULTS?

**I UNDERSTAND & CONSENT TO AN ACCESS NI DISCLOSURE CHECK THAT MUST BE CARRIED OUT BEFORE MY APPOINTMENT CAN BE CONFIRMED. I AM AWARE THAT SPENT CONVICTIONS MAY BE DISCLOSED. I DECLARE THAT THE INFORMATION IN THIS APPLICATION IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT WILL FALSIFYING OR SUPPRESSING INFORMATION MAY MAKE ME LIABLE FOR DISQUALIFICATION FROM APPLICATION PROCESS OR DISMISSAL FROM EMPLOYMENT. I UNDERSTAND TRAINING IS NOT AN OFFER OR GUARANTEE FOR WORK AND WILL NOT BE PAID.**

SIGNATURE: DATE

**ACCESS NI CHECK**

**A blue and white sign

Description automatically generated**

**New Start Training at Primecare**

**If your application is successful, you will receive an email containing details for your new start training at Primecare.**

**This will take place at our main office:**

**Location: Primecare main office 77 Eglantine Avenue, Belfast BT9 6EW**

**You will be contacted by Stacey HR Officer when you will complete your Access NI . The cost of your Access NI is £33, payable by cash.**

**You will need the following:**

\*Bank statement/utility bill issued within 3 months (not a phone bill)

\*Photographic ID: driving licence, electoral card, passport

**In light of the current circumstances regarding Covid 19, it is vital that we take steps to reduce risk and keep everyone safe. Please see points below:**

1) if you are feeling unwell or suffering from any Covid 19 symptoms: DO NOT attend the office. Please contact your GP or 111 and follow advice

2) On entry/exit to the office please use sanitiser provided (sitting on the table)

3) Please bring your own food & drink provisions and take your rubbish with you

4) Do not share pens

5) Maintain social distancing of 2 metres

6) Please wear the mask provided unless you are exempt for medical conditions.

7) At break times, the trainer will advise on how to exit the training room and when returning please ensure that you follow the sanitising rules again

8) If using toilet facilities, please ensure that you wash your hands correctly - posters in bathroom and sanitise your hands prior to returning to the training room.

9) If you feel unwell throughout the training, please alert the trainer from your seat and you can leave the premises.

10) Please complete the training questionnaire provided on the day.

**If you cannot attend this training session, please give us 72 hours’ notice, failure to do so will or may result in your application being withdrawn.**

**Contact Stacey HR Officer:** [**info@primecareni.com**](mailto:info@primecareni.com) **or telephone 0289663566**

Thank you for your cooperation and we hope that you enjoy the training.