

**Application for Employment:**

**Supported Housing & Lifestyles Worker**

Please refer to the job description and the person specification for the position you are applying for before completing this application. You are required to complete a White Leaf Support application form, CV’s will also be considered as a supporting document to your application.

**Position Applied For** Choose an item.

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| **Title:** Click or tap here to enter text. | **Education**  Click or tap here to enter text. | **Qualifications Gained**  Click or tap here to enter text. | **Date obtained (Month/Year)**  Click or tap here to enter text. |
| **Surname:** Click or tap here to enter text. |
| **Forename:**Click or tap here to enter text. |
| **Address:**  Click or tap here to enter text.  **Postcode:**  Click or tap here to enter text.  **E-mail address:**  Click or tap here to enter text.  **Telephone Number:**  **Mobile:**Click or tap here to enter text. |
| **Professional Training**  Click or tap here to enter text. | **Qualifications Gained**  Click or tap here to enter text. | **Date obtained**  **(Month/Year)**  Click or tap here to enter text. |
| **National Insurance Number:**  Click or tap here to enter text. |

**Please list all relevant home addresses including month and year you moved to the address and left the address. If less than 5 years, please detail past addresses to cover this period (use the back of this sheet as necessary):**

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| **Address** | **Month /Year you moved to the address** | **Month /Year you moved from the address** |
| Click or tap here to enter text.  Click or tap here to enter text.    Click or tap here to enter text. | Click or tap to enter a date.  Click or tap to enter a date.  Click or tap to enter a date. | Click or tap to enter a date.  Click or tap to enter a date.  Click or tap to enter a date. |

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| **Employment History**  (Please complete in full using a separate sheet if necessary. Please give reasons for any gaps in employment) | | | | |
| **Present and last employers**  Business name and address | **Employment**  Please state month and year role commenced and ended | **Position held and main duties and job tasks** | **Final**  **Salary** | **Reason for Leaving** |
| Click or tap here to enter text. | Click or tap to enter a date.  Click or tap to enter a date. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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| **References**  Please provide details of two referees who can provide information related to your competency in a caring role (not friends or relatives). One of your referees must be your present or most recent employer. If you are a student, please give an academic referee. By providing these details, confirms your consent for them to be contacted (once a job offer has been accepted).  In some cases, we may request a third reference in order to attest to your character and abilities. This may be requested at any point prior to joining the company. | | | | |
| Name: Click or tap here to enter text. | | Name: Click or tap here to enter text. | | |
| Position: Click or tap here to enter text. | | Position: Click or tap here to enter text. | | |
| Organisation: Click or tap here to enter text. | | Organisation: Click or tap here to enter text. | | |
| Address:  Click or tap here to enter text.  Postcode: Click or tap here to enter text. | | Address:  Click or tap here to enter text.  Postcode: Click or tap here to enter text. | | |
| Email: Click or tap here to enter text. | | Email: Click or tap here to enter text. | | |
| Tel No: Click or tap here to enter text. | | Tel No: Click or tap here to enter text. | | |
| |  | | --- | | **Personal Information**  Please provide any additional information to support your application, your main achievements and strengths you may bring to this post.  Click or tap here to enter text. | | | | | |

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| **CRIMINAL RECORDS**  Due to the nature of the work for which you are applying this post is exempt from the provision of Section 4(2) of the Rehabilitation of Offenders Act 1974, by virtue of the Exceptions Order 1975 as amended by the Exceptions (Amendment) Order 1986. Convictions that are spent under the terms of the Rehabilitation of Offenders Act 1974 must be disclosed and will be taken into account in deciding whether to make an appointment. Any information will be confidential and will be considered only in relation to this application.  You are required to submit a DBS check. Any disclosure made by DBS will remain strictly confidential. Failure to declare a conviction, caution or bind-over may disqualify you from appointment or result in dismissal if the discrepancy comes to light.  **Have you ever been convicted in a Court of Law and/or cautioned in respect of any offence?** Choose an item.  **If ‘Yes’ please give details:**  Click or tap here to enter text.  **Statement of Policy**  White Leaf Support will comply fully with the Disclosure Barring Service (DBS) Code of Practice and treat all applicants and existing staff fairly. White Leaf Support will not discriminate unfairly against any subject of a Disclosure on the basis of a conviction or other information revealed.  The outcome will be that job applicants, existing staff and visiting service providers will not be treated unfairly because they have an offending background or criminal record.  Any information may be held by White Leaf Support in accordance with the General Data protection regulations (GDPR). |

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| **DECLARATION**   1. I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered. 2. I agree that this information will be retained in my personnel file during employment and for up to six years thereafter. I understand that information will be processed in accordance with the Data Protection Act (GDPR). 3. I agree that should I be successful in this application of employment, White Leaf Support will apply to the Disclosure Barring Service (DBS) with my consent upon accepting a job offer. I will be required to pay for the application (currently £52) which will be reimbursed following three months of employment. 4. I understand all offers of employment are subject to successful references and DBS certificate.   I understand that any offer of employment may be withdrawn, or my employment terminated in line with the above terms.  **Signed** Click or tap here to enter text.  **Date** Click or tap to enter a date. |

**Please return your form to the Recruitment and HR Department: recruitment@whiteleafsupport.com**

**White Leaf Support, Unit 1 Lancaster Court, Coronation Road Cressex Business Park, High Wycombe, Buckinghamshire HP12 3TD, 01628 533 983**