## CONFIDENTIAL JOB APPLICATION FORM



An Equal Opportunities Employer

The Arthur Medical Centre

Please complete all sections of the form and return it to Fiona Barrett at The Arthur Medical Centre, Main Street, Horsley Woodhouse, Derbyshire, DE7 6AX

JOB DETAILS							
Job title	Practice Nurse						
Closing date	03 July 2015						
PERSONAL DETAILS	3						
Title Sur	name		F	irst names			
Previous names [(If any)			Ρ	referred first n	name		
National ins no [				Address			
Telephone	Day						
	Evening						
	Mobile			Postcode			
[	Email						
PRESENT OR MOST	RECENT EMPLOYER	2					
Employer and ad	dress	Job title					
		Annual salary o equivalent	or full	time		Start date	
		Notice required if working					
Reaso date (		Reason for leav date (if applica	ving ( able)	and			
Brief details of main duties and responsibilities							

## Please give details of all previous jobs since leaving full time education. Full details should be given for

Please give details of all previous jobs since leaving full time education. Full details should be given for any period not accounted for by full time employment, education or training (e.g. unemployment, voluntary work, raising a family, part time work.)

Employer and address	Job title and main duties	Da From	tes To	Reason for leaving

MEMBERSHIP (	OF PROFESSIONAL BODIES,	/ASSOCIATIONS
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**PREVIOUS EMPLOYMENT** 

Please give details of membership of professional or technical bodies/associations. This section will not be relevant for some jobs.

Name of professional body	Membership level	Date joined	Professional registration number/reference

Establishment attended	Course	Qualification(s) or	Dates	
		outcome	From	to
PROFFESIONAL AND VOCATION	NAL TRAINING			
Please give details of any relev	vant training. This section	on will not be relevant to so	ome jobs	
Establishment attended	Course	Qualification(s) or	Dat	tos
Establistiment affended	Coorse	Qualification(s) or outcome	From	to

**EDUCATION** 

Please give details of your education and qualifications.

SUITABILITY FOR JOB					
Using the job description and person specification provided, please give further details about why you believe you are sutiable for this job. You may wish to give examples of previous experience or skills and abilitites, or any knowledge you have. Please continue on a separate sheet if necessary.					

Please give the names and addresses of two per eferee must be your present or most recent emp application is not delayed.	ople we may contact for references. Your first ployer. Full contact details must be given so that you
Name of your first referee	Name of your second referee
Their job title	Their job title
Their relationship to you e.g. line manager	Their relationship to you e.g. line manager
Organisation and address	Organisation and address
Email	Email
Telephone	Telephone
Can we contact your referees before an offer of	
Written references will be needed for any car ensure your referees are aware of this, and ar will be asked for information on disciplinary iss	re happy to provide this information. Referees

## APPLICANTS WHO ARE PATIENTS OF ARTHUR MEDICAL CENTRE

Arthur Medical Centre considers that employing staff who are patients of the practice has significant disadvantages both to the patient and to the practice. Please note therefore, that if your application is successful, you will be required to register elsewhere.

them relevant to the job for which you have applied. You are not required to disclose offences which are spend under the Rehabilitation of Offenders Act 1974, unless the post for which you have applied is exempt under the Act. For these exempt jobs both spent and unspent offences must be disclosed. If the vacancy for which you are applying requires such a disclosure, this will be stated clearly on the advertisement and the supporting details you will have received with this form. For these posts an offer of appointment will be subject to satisfactory Criminal Records Bureau clearance. Any information disclosed will be treated in the strictest confidence.					
Have you any criminal convictions or are you at present the subject of criminal charges?  Yes [ ] No [ ]					
If yes, please provide details in a sealed envelope marked "Confidential" and bring to interview.					
DECLARATION					
I declare that the information on this form is true and accurate.					
I understand that providing misleading or false information will disqualify me from appointment or may lead to me being dismissed if appointed to the post.					
Privacy notice I consent to the information contained in this form, and any other information received by or on behalf of the Arthur Medical Centre relating to my application, being processed by the Arthur Medical Centre in administering the recruitment process and to assist with the prevention and detection of fraud.					
Signature Date					
If you submit this form electronically, you will be required to sign this declaration if invited to interview.					
Please advise us of any other information relevant to the recruitment process so we can ensure every attempt is made to meet your needs. This could include dates when you are not available for interview or any special requirements you may have such as necessary equipment and/or resources to enable you to attend an interview.					

Please give details of any criminal convictions, warnings, reprimands, bindings over or other orders, pending prosecutions, or criminal investigations. **We will only take them into account if we consider** 

**DISCLOSURE OF CRIMINAL RECORDS** 

## **EQUAL OPPORTUNITIES MONITORING FORM**

The Arthur Medical Centre is committed to its equality and diversity policy. We want to do all we can to prevent discrimination in any form and you can help us in this by completing the information below. The information given on this sheet will **not** be used to make decisions about who is recruited. The form will **not** be seen by the short listing/interview panel. It will be used to improve equality in recruitment and overall service delivery. Your help filling in this form if greatly appreciated. Thank you.

DATE OF BIRTH DD		MM	YYYY			
RACIAL OR ETHNIC ORIGI	NS					
White British	WB Other mixed I	background	MO Black Carribean	ВС		
White Irish	WI Indian		Al Black African	ВА		
White other	☐ WO Pakistani		AP Other black background	ВО		
White & Black Caribbean	MC Bangladeshi		AB Chinese	ОС		
White & Black African	MB Other Asian B	ackground	OA Gypsy or Irish Traveller	OG		
White & Asian	MA Arab		AR Any other	ОТ		
DISABILITY						
Are you disabled?	Υe	es 🔲 N	0 🗌			
The Arthur Medical Centre every appropriate suppor			abled people and undertakes to a iin employment.	offer		
GENDER						
Male 🗌	Female					
RELIGION/BELIEF – Please	tick only one box					
Buddhist	Jewish		None			
Christian (all denomina	ations) Muslim		Other religion or bel	ief		
Hindhu	Sikh		Prefer not to say			
SEXUAL ORIENTATION						
Bisexual  Heterosexual	Lesbian or gay w Prefer not to say	oman 🗌	gay man 🗌 Other 🔲			
HOW DID YOU FIND OUT ABOUT THIS JOB?						
E.g. Arthur Medical Centre website, newspaper (please tell us which) Job Centre etc.						