

**Yardley Great Trust**  
*fighting poverty and providing high quality care and housing for older people in South East Birmingham*  
**31 OLD BROOKSIDE, YARDLEY FIELDS ROAD, STECHFORD, BIRMINGHAM B33 8QL**  
 TEL: (0121) 784 7889 FAX: (0121) 785 1386 WEB: www.ygt.org.uk

**APPLICATION FOR EMPLOYMENT - CONFIDENTIAL**

**POSITION APPLIED FOR** \_\_\_\_\_

**TITLE MR/MRS/MISS/MS\* CROSS OUT AS APPROPRIATE**

**FIRST NAME** \_\_\_\_\_ **LAST NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

\_\_\_\_\_ **POST CODE** \_\_\_\_\_

**TELEPHONE NUMBERS HOME** \_\_\_\_\_ **WORK** \_\_\_\_\_

**CAN WE CALL YOU AT WORK? YES/NO\***

**NATIONAL MINIMUM STANDARDS FOR CARE HOMES FOR OLDER PEOPLE, STANDARD 27.6**

**If the job for which you are applying involves the provision of care in Greswold House, please tick this box if you are 18 years of age or over**

**If you are applying for the role of Senior Care Assistant, Deputy Manager or Manager at Greswold House, please tick this box if you are 21 years of age or over**

**SECONDARY EDUCATION**

SCHOOL	EXAMS TAKEN	RESULTS	DATE FINISHED (MONTH/YEAR)#

**FURTHER EDUCATION**

PLACE	EXAMS/ COURSES TAKEN	RESULTS	START AND END DATES (MONTH/YEAR)#

**# DATES ARE ONLY REQUIRED FROM APPLICANTS FOR JOBS INVOLVING THE PROVISION OF CARE**

**MEMBERSHIP OF PROFESSIONAL ASSOCIATIONS**

NAME OF ASSOCIATION	GRADE OF MEMBERSHIP	IS ENTRY BY EXAMINATION?

**CURRENT OR LAST EMPLOYMENT**

NAME AND ADDRESS OF EMPLOYER	DATES FROM/TO	POSITION, MAIN DUTIES	RATE OF PAY

**HOW MUCH NOTICE ARE YOU REQUIRED TO GIVE?** \_\_\_\_\_

**EMPLOYMENT HISTORY**

NAME AND ADDRESS OF EMPLOYER	DATES FROM/TO MONTH/YEAR	POSITION, MAIN DUTIES	RATE OF PAY	REASON FOR LEAVING

**NOTE: THIS QUESTION ONLY HAS TO BE ANSWERED IF THE JOB INVOLVES DRIVING**  
**DO YOU HAVE A CURRENT DRIVING LICENCE? YES/NO\***  
 IF YES, DOES YOUR LICENCE HAVE ANY ENDORSEMENTS OR PENALTY POINTS? YES/NO\*  
 IF YES, GIVE DETAILS

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**IF YOU DO ANY VOLUNTARY WORK, PLEASE WRITE DOWN WHAT SORT OF WORK IT IS, HOW MUCH TIME IT TAKES AND FOR WHOM YOU DO THE WORK**

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**PLEASE WRITE DOWN THE DATES OF ANY HOLIDAYS YOU HAVE BOOKED**

FROM

TO

**ARE THERE ANY RESTRAINTS ON YOU WHICH MIGHT AFFECT YOUR ABILITY TO DO THE JOB ADVERTISED? YES/NO\***

IF YES, GIVE DETAILS

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**GIVE DETAILS OF TWO REFEREES TO COVER YOUR LAST THREE YEARS EMPLOYMENT OR, IF SHORTER, ALL OF YOUR EMPLOYMENT. ONE OF THE REFEREES MUST BE YOUR CURRENT OR LAST EMPLOYER.**

	NAME	COMPANY	ADDRESS	TELEPHONE
1.				
2.				

**CAN WE CONTACT REFEREES PRIOR TO INTERVIEW? REF. 1 YES/NO\* REF. 2 YES/NO\***

**DO YOU REQUIRE A WORK PERMIT? YES/NO/DON'T KNOW\***

**PLEASE WRITE DOWN DETAILS OF ANY SKILLS, KNOWLEDGE AND EXPERIENCE YOU HAVE THAT YOU CONSIDER TO BE RELEVANT TO THIS JOB. CONTINUE ON SEPARATE PAPER IF NECESSARY.**

**DECLARATION**

**I DECLARE THAT THE INFORMATION I HAVE GIVEN ON THIS FORM IS TRUE AND COMPLETE AS FAR AS I KNOW. I UNDERSTAND THAT GIVING FALSE INFORMATION OR DELIBERATELY WITHHOLDING INFORMATION MAY RESULT IN ANY JOB OFFER BEING WITHDRAWN OR, IF I HAVE STARTED WORK, MY DISMISSAL.**

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

<b>OFFICE USE</b>	
CHOSEN FOR INTERVIEW YES/NO*	STARTING PAY £                      PER
OFFERED JOB YES/NO*	START DATE
APPOINTED YES/NO*	REF LETTERS: SENT (1)                      (2)
MEDICAL REQUIRED YES/NO*	REPLY REC'D      (1)                      (2)
NO OF SHIFTS PW                      HRS PER SHIFT	LETTER SENT
TOTAL HOURS PER WEEK	

# Yardley Great Trust

fighting poverty and providing high quality care and housing for older people in South East Birmingham

since 1355

## Equal Opportunities Form

Please tick one box per question where appropriate.

### 1. PEOPLE WITH DISABILITIES\*

Do you have a disability?

Yes	<input checked="" type="checkbox"/>
No	<input checked="" type="checkbox"/>
I prefer not to answer	<input checked="" type="checkbox"/>

If yes, please let us know below if we need to make any particular arrangements if you are selected for interview

\* We guarantee to interview all people with disabilities who meet the essential criteria for the job.

### 2. ETHNIC ORIGIN

I consider my ethnic origin to be:

<b>Asian:</b>	
Indian	<input checked="" type="checkbox"/>
Pakistani	<input checked="" type="checkbox"/>
Bangladeshi	<input checked="" type="checkbox"/>
British Asian	<input checked="" type="checkbox"/>
Other Asian	<input checked="" type="checkbox"/>
<b>Black or Black British:</b>	
Black British	<input checked="" type="checkbox"/>
Black Caribbean	<input checked="" type="checkbox"/>
Black African	<input checked="" type="checkbox"/>
Other Black	<input checked="" type="checkbox"/>
<b>Chinese</b>	
<b>White:</b>	
British	<input checked="" type="checkbox"/>
Irish	<input checked="" type="checkbox"/>
Other	<input checked="" type="checkbox"/>
<b>Mixed:</b>	
White & Asian	<input checked="" type="checkbox"/>
White & Black African	<input checked="" type="checkbox"/>
White & Black British	<input checked="" type="checkbox"/>
White & Black Caribbean	<input checked="" type="checkbox"/>
Other Mixed	<input checked="" type="checkbox"/>
<b>Other Ethnic Group</b>	<input checked="" type="checkbox"/>
I prefer not to answer	<input checked="" type="checkbox"/>

### 3. GENDER

I am:

Male	<input checked="" type="checkbox"/>
Female	<input checked="" type="checkbox"/>
I prefer not to answer	<input checked="" type="checkbox"/>

### 4. AGE

I am:

under 18	<input checked="" type="checkbox"/>
18 -25	<input checked="" type="checkbox"/>
26 -50	<input checked="" type="checkbox"/>
51 or over	<input checked="" type="checkbox"/>