



COMPASS CARE HOMES LTD

SOUTH PARK
10 & 11 PARK DRIVE SOUTH
GLEDHOLT
HUDDERSFIELD
HD1 4HT

Tel/Fax: 01484 315551
E-Mail: compass.care@ntlworld.com
www.compasscarehomes.co.uk

APPLICATION FORM

PERSONAL DETAILS

Title First Names Surname

Address:

Tel No's: Day-time: ... Evening:

Date of Birth: Age:

Nationality: National Insurance No:

Do you have a driving licence: Yes No
Do you have any endorsements: Yes No
Please give details

EDUCATION

Please give details of any qualifications, level of achievement and when/where achieved

School attainments/ Further/adult education/Apprenticeships/Training courses

Any other skills

Work History Please give details of your career to date, include any voluntary work

Name of Employer	Date From	Date From	Brief details of Duties	Reason for leaving

What are your interests / hobbies?

Health record (if you answer yes to any of the following points, please give further details)

How much time off work, have you taken in the last 2 years?

What for??

Do you smoke? Yes No

To the best of your knowledge do you have any medical or physical problem that may affect your ability to carry out this kind of work? Yes No

Give details / Further information that may be relevant to the post

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This post is subject to Criminal Records check. You will be asked to provide identification and authorisation for this check to be carried out. This is to help us to protect our clients vulnerability. (a criminal record does not necessarily exclude you from being offered this post)

Please sign here to state that you will be able to do this:

Please indicate whether you have any criminal convictions spent or unspent.....

Where did you hear about this post?

.....
What interested you about this post to apply? What skills/attributes to you have that you think will be useful here?

.....

Please give 3 references (one should be a previous employer)

Name:	Name:	Name:
Address	Address	Address
Tel/Fax/e-mail	Tel/Fax/e-mail	Tel/Fax/e-mail
How do you know them?	How do you know them?	How do you know them?

How soon can you start work?

Please sign that the information you have given is to the best of your knowledge accurate

Sign **Date**