# Quality Checker

# Job Application Form

##

## About you

Your name:



Where you live:



Your contact details:

 Home telephone number: ……………………………………………………………

  Mobile telephone number: ...………………………………………………………

  Email address: .…………………………………………………………………………….

Your national insurance number:

|  |
| --- |
| Image result for national insurance card image   |

Tell us the days you are available to work:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  Monday  | Tuesday | Wednesday | Thursday | Friday |
|  |  |  |  |  |



##  Education

Please tell us about any courses you have done and qualifications you have:

|  |  |  |
| --- | --- | --- |
| Qualification and Grade |

|  |
| --- |
| Name of School, College, or University  |

 |
|  |  |

 Employment

Please tell us about any paid or unpaid work you have done:

|  |  |  |
| --- | --- | --- |
|

|  |
| --- |
| What was the job title and what did you do?  |

 | Who was the job with and when did you do it?  |
|  |  |

Please continue on another sheet if you need to.

|  |
| --- |
|  Tell us about yourselfWhat makes you a good person to do this job? Please think about the skills you will need (you can find these in the job specification). |

## References

Please give us the name and contact details of 2 referees/people who know you well – your referees cannot be family members.

|  |  |  |
| --- | --- | --- |
| Name and how youknow this person | Their address and Phone Number | Their Email Address |
|  |  |  |
|  |  |  |



##  Disclosure and Barring (Keeping People Safe)

As you will be going into the homes of people who are vulnerable you will need to complete a DBS check form.

|  |  |  |
| --- | --- | --- |
| Do you have any /have you had any convictions, cautions, reprimands or warnings that will appear on a DBS check or are you subject to on-going police investigation or proceedings? If yes please tell us about it: |  Yes |  No  |

# Image result for signing name imageI confirm that the information is true and I give consent for Voyage Care to check any information I have provided on this application form.

Signature…………………………………………………………………… Date………………………………