

# New Hope Housing and Support Ltd Application Form

| Position Applied For: |  |
|-----------------------|--|
| Name:                 |  |
| Date:                 |  |

Please Provide a passport photo for your ID

Please complete the form and save. Email your completed application form along with all the requested attachments to the following address:

admin@newhopecareltd.co.uk

## **New Hope Housing and Support Ltd**

| Name | Date |
|------|------|
|      |      |

| Documents Checklist   | Yes/No |
|---|--------|
| Please complete the Application Form (All sections should be completed and signed)      |        |
| CV & Cover letter attached (cover letter is optional)                                   |        |
| 2 References (Contact name, email & address)  |        |
| Completed DBS Form (You will need to for the DBS)                                       |        |
| Passport photo & mother's maiden name   |        |
| Supporting Documents:   |        |
| 2 Proofs of ID (Passport, Driving Licence, Birth Certificate, etc)                      |        |
| 2 Proofs of addresses (utility bills, mobile/telephone bills, etc) Valid within 3months |        |
| National Insurance Number (NI)  |        |
| If you are a driver, you need to bring/ attach additional documents:                    |        |
| Valid Driving Licence and Business Insurance Certificate                                |        |

## Please fill in all sections of the application form

| (Section 1) Personal Details |                                |                                    |               |                                    |  |
|------------------------------|--------------------------------|------------------------------------|---------------|------------------------------------|--|
| Title                        | Mr ☐ Mrs ☐ Ms. Miss ☐ Other: ☐ |                                    |               |                                    |  |
| Surname                      |                                | Fore                               | name          |                                    |  |
| Middle Name                  |                                | Date                               | of Birth      |                                    |  |
| Gender                       | Male ☐ Female ☐                | 2                                  | N.I.<br>umber |                                    |  |
|                              | Other □                        |                                    |               |                                    |  |
| Home Address                 |                                | Posto                              | code          |                                    |  |
| Contact Number               | Home                           | Mobi                               | ile V         | Vork                               |  |
|                              |                                |                                    |               |                                    |  |
| Email Address                |                                | 1.6                                |               | ••• 1                              |  |
| Nationality                  |                                | Euro<br>have<br>rem                | e the perman  | , or you do not                    |  |
| Do you need a work           | Circle below                   | If you circled yes to the previous |               |                                    |  |
| permit to work in            |                                | question, what is the expiry date  |               |                                    |  |
| the UK?                      | Yes No                         | of your work permit?               |               |                                    |  |
| (if applicable)              |                                | wor                                |               | t your current<br>not be valid for |  |
| Mother's Full Name           |                                |                                    |               |                                    |  |
|                              | (Section 2) Next of K          | in Deta                            | ails          |                                    |  |
| Full Name                    |                                | Relationship to you                |               |                                    |  |
| Contact Number               |                                |                                    |               |                                    |  |
| Home Address                 |                                |                                    | Post Code     |                                    |  |

#### **ID Checks**

#### Please send the following proof:

#### Two documents from Group 1 and two documents from group 2

#### **Group 1: (2proof of ID)**

- Valid Passport
- Birth Certificate
- Valid Driving Licence (Photocard)
- Adoption Certificate
- Biometric residence Permit

#### **Group 2: (2 Proof of Address)**

#### Please avoid printing online proofs, hard copies are preferred.

- Utility Bill: Within the Last 3 months
- Bank or Building Society Statement: Issued in the last 3 months
- Marriage/ Civil partnership Certificate
- Mortgage statement: Issued in the Last 12 months
- Bank or Building Society account opening confirmation letter: Last 3 months
- Credit Card Statement: Last 3 months
- Financial Statement (Pension / endowment): Last 12 months
- P45/P60: Last 12 months
- Council Tax Statement: Last 12 months
- Work Permit / Visa: Valid up to expiry date
- Letter of sponsorship from future employment: Valid
- HM Forces ID Card
- Benefit Statement: Last 3 months
- EU National ID Card: Valid
- Letter from head teacher or college principal: Valid

Both documents should contain your current address and within 3 months

If you have any difficulty providing the above proof documents, please contact the office.

| (Section 3) Previous Employment |                        |       |  |  |                             |  |   |                    |
|---------------------------------|------------------------|-------|--|--|-----------------------------|--|---|--------------------|
| Name and Address of Employer    | Dates of<br>Employment |       |  |  | me and Address of Employmen |  | Job Title and a brief description of duties | Reason for Leaving |
|                                 | From                   | То    |  |  |                             |  |   |                    |
|                                 | MM/YY                  | MM/YY |  |  |                             |  |   |                    |
|                                 |                        |       |  |  |                             |  |   |                    |
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| (Section 4) Education / qualifications |            |              |                  |                |  |
|--|------------|--------------|------------------|----------------|--|
| _                                      | Dates of I | Education    |                  |                |  |
| University /College                    |            | Γ_           | Course / Subject | Exam Results / |  |
| /Secondary School                      | From       | To NADA (VVV |                  | <u>Grades</u>  |  |
|  | MM/YY      | MM/YY        |                  |                |  |
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### (Section 5) Additional Information in Support of your application

Please use this space to provide any additional information in support of your application. If necessary, please continue a separate sheet.

| (Section 6) Vehicle /Licencing Details   |                   |          |               |                |
|--|-------------------|----------|---------------|----------------|
| Do you hold a full Driving Licence that allows you to drive in the UK?   |                   |          | Yes 🗀         | No 🗆           |
| What is your driving license number?   |                   |          |               |                |
| Do you have access to a car that you can use   | for work?         |          | Yes $\square$ | ] No 🗆         |
| Have you been banned from driving, or do you endorsements on your license?   | ou have any curre | nt       | Yes _         | ] No □         |
| Does your car insurance include Class 1 busin  | ness insurance?   |          | Yes 🔲         | No 🗆           |
| If yes, please provide proof of your business  | insurance         |          | Proof p       | orovided Yes 🔲 |
|  |                   |          |               |                |
| (Section 7) References  References are normally taken up for candidates selected for interviews.  Please give details of 2 references. This could either be a personal or professional reference.  Please ensure you ask the referee before providing their details. |                   |          |               |                |
| First Reference  |                   |          |               |                |
| Full Name  |                   | Position | on            |                |
| Address  | Postcode          |          |               |                |
| Email Address  |                   |          |               |                |
| Relationship to you  |                   |          |               |                |
| May we contact the above person before the interview   | Yes  No           |          |               |                |
| Second   | l Reference       |          |               |                |
| Full Name  |                   | Position |               |                |
| Address  | Postcode          |          |               |                |
| Email Address  |                   |          | l             |                |
| Relationship to you  |                   |          |               |                |
| May we contact the above person before   | Yes No            |          |               |                |

the interview

#### (Section 8) Declaration and Data Protection Statement

The information that you provide on this form and that obtained from other relevant sources will be used to process your employment application.

The personal information that you give us will also be used confidentially to help us monitor our recruitment process.

We may disclose your information to carefully selected third parties who may process data on our behalf or any of our clients to ascertain your suitability.

If you are appointed, the information will be used in the administration of your employment with us. We may also use the information if there is a complaint or legal challenge relevant to this recruitment process. We may check the information collected with third parties or with other information held by us. We may also use or pass them to certain third parties to prevent or detect crime or in other ways as permitted by law.

By signing this application form, we will be assuming that you agree to the processing of sensitive personal data, as described above, by our registration with the Data Protection Commissioner.

I declare that the information set out in this form is true and correct. I understand and agree that if I submit any false or misleading information, this may result in any offer of employment with the company being withdrawn or if already accepted will lead to dismissal without notice.

I hereby authorise New Hope Housing and Support to collect all information they may require in connection with my employment application.

I confirm that I have read and understood the conditions of Engagement offered by the company and agree to comply with them and be bound by them.

I have no objection to my details being held on computer records and utilised by the company in pursuit of its legitimate business.

I understand that my application is subject to the receipt of satisfactory references and DBS checks. I agree to inform New Hope Housing and Support of any changes to the information I have supplied.

| Signed | Date |
|--------|------|
|--------|------|

#### (Section 9) Confidentiality Declaration

#### Registration implies acceptance of our code of confidentiality.

In the course of your duties, you may have access to confidential information about clients at New Hope Housing and Support. On no account must information about our clients of New Hope Housing and Support be indulged to ANYONE other than the registered manager. You should not disclose ANY information to your family, friends, or neighbors. If you are worried about any information, you have obtained and believe you need to talk to someone, please book an appointment with the registered manager.

Failure to observe these rules will be regarded as serious misconduct which could result in removal from our agency.

I have read and understood the above and I agree to abide by the contents therein.

| Signed | Date |
|--------|------|
|        |      |

## (Section 10) Rehabilitation of Offenders Act 1974

| (  |
|--|
| The Rehabilitation of Offenders Act 1974 (Exceptions) Orders 1975 and the Rehabilitation of Offenders Act 1974 (Exceptions) (Amendment) Order 1986 provides that people in employment who is concerned with the provision of care or who carry out their duties wholly or partly on the premises where such provision takes place are obliged to disclose any convictions which would otherwise be spent. The Care Home Regulations provide that people in employment who are concerned with the provision taking place are obliged to disclose any criminal convictions, conditional discharges, bind-overs, or caution that they have been subject to at any time in the past. |
| Your answer to the following question should include any 'spent' convictions, conditional discharges, bind-overs, or cautions. The 'Company' actively promotes equality of opportunities for all, as stated in its equality opportunities policy, which can be found in the employee handbook.   |
| Have you ever been convicted of a criminal offense or received a police conditional discharge, bind-over, caution, warning, or reprimand?  Yes  No   |
| Have you ever been issued a penalty notice for disorder? Yes No  |
| If so, what was the offense?   |
| Date:  |
| Making a false statement or any attempt to conceal information regarding this declaration will lead to the rejection of your application for employment at New Hope Housing and Support. Any details provided will be treated in the strictest confidence and will not automatically exclude anyone from being considered for any vacancy.   |
| Declaration  |
| I have completed an application for a Disclosure and Barring Service check and can further state that to the best of my knowledge and belief, there will not be any positive disclosure made that will preclude me from working with vulnerable adults or children.  I also permit a copy of the disclosure to which I am subject to, be made available to a named authorised person upon written request, who acts on behalf of a national government or local government department for auditing purposes.   |

Name:...... Date:...... Date:.....

| (Section 11) Disability Discrimination Act 1995  New Hope Housing and Support offers a guaranteed interview to any applicant who considers him/her to be disabled, and who meets the minimum essential requirements for the post.   |  |                          |                               |            |          |                |  |
|---|--|--------------------------|-------------------------------|------------|----------|----------------|--|
| Do you consider   | yourself to be disabled                            | d, under the disabi      | lity act?                     | Yes        | No       |                |  |
| If yes, are there accommodate a job?  | Yes  | No                       |                               |            |          |                |  |
| If yes, please provide further details  |  |                          |                               |            |          |                |  |
| •   | n interview do you req<br>tations to help you atte | •                        |                               | Yes [      | □ No     |                |  |
| If yes, what assis  | stance/adaptation do y                             | ou require?              |                               |            |          |                |  |
|   |  |                          |                               |            |          |                |  |
|   | (Section 12) EQUA                                  | L OPPORTUNITY Q          | UESTIONNA                     | AIRE       |          |                |  |
| New Hope Housing and Support aims to be an equal opportunity employer and seeks to ensure that job applicants are interviewed and/or put forward for vacancies solely based on merit, irrespective of race, disability, age, gender, nationality, religion, sexual orientation or offending background. To monitor the effectiveness of our policy. We request all job applicants to provide the information requested below. |  |                          |                               |            |          | t,<br>nding    |  |
|   | hich of the following d                            | o you consider to        | be your eth                   | nic origin | 1?       |                |  |
| White   | Mixed/Multiple<br>Ethnic groups                    | Asian/ Asian<br>British  | Black/B<br>Britis             |            | Ot       | her            |  |
| □White British  | □White and Black<br>Caribbean                      | □Indian                  | ☐ African                     |            | □ Arab   |                |  |
| White Irish   | ☐White and Black African                           | □ Pakistan □ Bangladeshi | ☐ Caribbea☐ Other Black/Afric |            | □ Any o  |                |  |
| ☐ Gypsy or Irish<br>Traveller   | □White and Asian                                   | ☐ Chinese                | ☐ Caribbea                    | an         | □ Not ki | nown/<br>vided |  |
| ☐White Other  | Any other mixed background                         | ☐ Asian Other            |                               |            |          |                |  |

Please complete the form and return it to the office.