

Application Form for Post of Personal Assistant (Care)

Please fill in the form below giving as much detail as you can. This post is available now and I need a Personal Assistant (PA) as soon as possible. Please return this form promptly, as I shall be interviewing applicants very soon. Thank you for your interest and time.

Due to the nature of the work involved, this position is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974 (Exemptions) Order 1995. Applicants are therefore not entitled to withhold information about convictions, which for other purposes are considered 'spent' under the provisions of this Act. In the event of employment, any failure to disclose such convictions could result in dismissal. Information given is confidential and will only be considered in connection with the post of Personal Assistant. A criminal record disclosure may not be a bar to obtaining a position. A CRB (Criminal Record Bureau) disclosure may be required for this position.

Full Name: Gender: M / F

Address:

..... Postcode:

E-mail Address:

Contact Telephone No(s):

National Insurance No: Nationality:

Date of Birth: Do you smoke?: Yes / No

Details of any convictions (including Driving Endorsements):

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Do you hold a current Driving Licence?:

Do you have your own transport?:

How would you travel to work?:

Do you have any commitments that would restrict your availability (eg dependants)?:

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What areas are you willing to travel to?:

What days/part days are you available for work?:

What times are you available to work?:

Are you willing to do 24-hour live-in care when required?:

Are you willing to 'sleep-over' occasionally?:

Would you help us with Emergency Cover/On Call?:

Would you prefer to work with either Male or Female?:

Do you have knowledge of British Sign Language ?

What languages other than English can you speak ?

Details of your experience of residential or care work:

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Relevant qualifications/skills, eg signing etc:

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Your current state of health. Any restrictions on lifting?:

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Do you mind animals?:

Any hobbies or special interests?:

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Why are you applying for this job? Why do you feel you would be good at it?:

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When would you be available to start?:

1. Name and address of **present employer**:

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Post held: Salary:

2. Name and address of past employer:

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Post held: Salary:

3. Name and address of past employer:
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Post held: Salary:

If you need to include more employment details please complete an additional sheet and attach it to this form.

Please supply the name of two referees, with addresses/telephone numbers. If you have worked during the last five years one reference must be your present or most recent employer. The second reference must be someone outside of your family who would give you a reference to show that you are trustworthy and reliable:

1. 2.
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Telephone No: Telephone No:

There are many people with disabilities who need Personal Assistants (Care) in the same way that I do. If you were unsuccessful this time with me, would you be willing to work in other areas, and allow me to pass your name and details on to both Independent Living Advocacy Ltd and Essex PASS, who seek to introduce PA's to disabled employers?

Please tick: Yes No

Where did you hear about this Vacancy (please circle) Newspaper, Internet, Employer Direct, Other (Please specify)

Please note: You will not be contacted unless your application has been successful/your services are required by another client. If you choose to become a member on the database, you will be removed after two months.

Please return this form to:	Independent Living Advocacy Ltd Unit 4 Whitelands Terling Road Hatfield Peverel CHELMSFORD CM3 2AG Telephone No: 01245 380888
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Or to:
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