



INVESTOR IN PEOPLE



## AVALON ENTERPRISE (UK) LIMITED

### Application Form

Position Applied For: \_\_\_\_\_

How did you hear about this vacancy: \_\_\_\_\_

Full Name: \_\_\_\_\_

Previous Names & Dates of Use: \_\_\_\_\_

Mr / Mrs / Miss / Ms / Other (please state) \_\_\_\_\_

Date of Birth(Optional): \_\_\_\_\_ National Insurance No: \_\_\_\_\_

Full Current Address (inc postcode): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Date you moved here: Month \_\_\_\_\_ Year \_\_\_\_\_

Further on you will be asked to provide addresses for the last 5 years.

Telephone No: \_\_\_\_\_ Mobile No: \_\_\_\_\_

Nationality: \_\_\_\_\_ Do you need a work permit: YES / NO

Next of Kin: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone No: \_\_\_\_\_

Number of Dependants: \_\_\_\_\_

Do you hold a current U.K Driving Licence: YES / NO

If yes, do you have any driving limitations (e.g. automatic only) \_\_\_\_\_

Do you have any driving convictions: YES / NO

if yes, please give brief description of convictions & include penalties you received:

\_\_\_\_\_

Do you have your own transport: YES / NO

Name of G.P: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Address: \_\_\_\_\_



## REFERENCES

Please provide the name, address & contact numbers of two referees.

### Reference 1:

Must be current or previous employer. Employment should not have been for less than 3 months in duration.

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Town: \_\_\_\_\_

County/Region: \_\_\_\_\_ Post/Zip Code: \_\_\_\_\_

Telephone No: \_\_\_\_\_

Relationship: \_\_\_\_\_

How long have you known this person: \_\_\_\_\_

### Reference 2:

Must be a professional / Character Reference and not related to you. Please note your doctor will not be able to give you a reference.

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Town: \_\_\_\_\_

County/Region: \_\_\_\_\_ Post/Zip Code: \_\_\_\_\_

Telephone No: \_\_\_\_\_

Relationship: \_\_\_\_\_

How long have you known this person: \_\_\_\_\_





## CRIMINAL CONVICTIONS DECLARATION

Do you have any criminal convictions?

YES / NO

Do you have any warnings / cautions / reprimands, spent or unspent?

YES / NO

If yes, please give details of all convictions, warnings, cautions or reprimands, spent or unspent.

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Please give details of the incident leading up to the conviction, warning, caution or reprimand.

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This post is exempt from the provisions of section r (2) of the Rehabilitation of Offenders Act 1974. Due to the nature of the job requirements your entitlement to withhold information, which for other purposes is "spent" does not apply. Please give any convictions above. Failure to disclose convictions may lead to dismissal. Any disclosures will be treated in the strictest confidence and will be considered only in relation to this application.

I confirm that the above statement concerning whether or not I have criminal convictions is true and correct, and understand that any misrepresentation will invalidate my application, and if employed could lead to my dismissal.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_



Please use the following table to tell us about the times when you will **NOT** be able to work on a regular basis.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
6am – 8am	6am – 8am	6am – 8am	6am – 8am	6am – 8am	6am – 8am	6am – 8am
8am – 10am	8am – 10am	8am – 10am	8am – 10am	8am – 10am	8am – 10am	8am – 10am
10am - Noon	10am - Noon	10am - Noon	10am - Noon	10am - Noon	10am - Noon	10am - Noon
Noon – 2pm	Noon – 2pm	Noon – 2pm	Noon – 2pm	Noon – 2pm	Noon – 2pm	Noon – 2pm
2pm – 4pm	2pm – 4pm	2pm – 4pm	2pm – 4pm	2pm – 4pm	2pm – 4pm	2pm – 4pm
4pm – 6pm	4pm – 6pm	4pm – 6pm	4pm – 6pm	4pm – 6pm	4pm – 6pm	4pm – 6pm
6pm – 8pm	6pm – 8pm	6pm – 8pm	6pm – 8pm	6pm – 8pm	6pm – 8pm	6pm – 8pm
8pm – 10pm	8pm – 10pm	8pm – 10pm	8pm – 10pm	8pm – 10pm	8pm – 10pm	8pm – 10pm
Night Approx 10pm – 6am	Night Approx 10pm – 6am	Night Approx 10pm – 6am	Night Approx 10pm – 6am	Night Approx 10pm – 6am	Night Approx 10pm – 6am	Night Approx 10pm – 6am

This is an approximation of hours worked and not an actual rota, as working hours differ from Service User to Service User according to their individual needs.

## DECLARATION

### Data Protection Act

I declare that the details given on this form are true to the best of my knowledge. I consent to the processing of data, including sensitive personal data supplied by me on this form by Avalon Enterprise (UK) Ltd.

I confirm that the information I have provided is true and correct and understand that any misrepresentations will invalidate my application, and if employed, could lead to my dismissal.

NAME: \_\_\_\_\_

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_