

**Priority Plus Nursing and Care Agency**  
**Job Application Form**  
 Room 26, Koco Building, Unit 15, The Arches, Coventry CV1 3JQ

Title of post applied for:		Job Ref:	
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Please write clearly in black ink or type in all relevant areas depending on the post.

**Confidential**

**1. PERSONAL DETAILS (BLOCK CAPITALS PLEASE)**

Surname:		First names	
Former surnames if different:		Preferred Name	
Address:		Title :	
		Tel No (home):	
		Tel No (work):	
		Tel No (mobile):	
Town	Post Code	Date of birth	
E-Mail address:		Nat. Insurance No:	
Nationality:		Are you a British citizen or a European Citizen..... Are you legible to work in the UK..... Visa Status.....Expiry Date.....	
Next of kin details Name..... .....		Relationship..... Tel number..... Address..... .....	
Where did you learn of the post?			
Preferred working arrangements	<input type="checkbox"/> Full-time <input type="checkbox"/> part time <input type="checkbox"/> Term time only		Any below Days Nights Weekends Weekdays

<b>To be completed by Registered Nurses Only</b>		Are you RGN <input type="checkbox"/> RMN <input type="checkbox"/>	
NMC PIN number	Part of register	Expiry	

## 2. EDUCATION AND PROFESSIONAL QUALIFICATIONS

(Original documents as proof of qualification will be required at interview.)

Secondary School / College / University	Dates		Qualification	Grades/Result
	From	To		

### Professional Qualifications

Qualification	Dates		Grades/Result
	From	To	

### Training Relevant to this Application

Qualification/Course	Dates		Grades/Result
	From	To	



#### 4. PREVIOUS EMPLOYMENT

(To cover 5 years work History, starting from most recent employment and attach your CV)

(Please use continuation sheet if necessary.)

Name and Address of Employers	Position held	Dates From	Dates To	Reason for leaving	Final grade/salary

Description of duties:

Name and Address of Employer	Position held	Dates From	Dates To	Reason for leaving	Final grade/salary

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Name and Address of Employer	Position held	Dates From	Dates To	Reason for leaving	Final grade/salary

Description of duties:

Name and Address of Employer	Position held	Dates From	Dates To	Reason for leaving	Final grade/salary

Description of duties:

Have you had any material gaps [more than three months] in your employment? Yes/ No, If yes, please provide relevant details:

**5. RELEVANT SKILLS, ABILITIES, KNOWLEDGE, EXPERIENCE AND YOUR REASONS FOR APPLYING FOR THIS JOB**

**6. OTHER INFORMATION**

What activities outside work interest you? (State any positions held you consider relevant.)

Do you hold a current driving license?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you own a car?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Health**

Please state the number of days sickness absence in the last 2 years:	
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NB: Successful candidates will be required to complete a full medical questionnaire.

**Immunization Status**

**Disability Discrimination Act 1995**

Do you consider yourself to be disabled under the Disability Discrimination Act?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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If Yes, are there any adjustments that you think we could make to overcome a disability in relation to the essential requirements of this job?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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If Yes, please provide further details:

If selected for interview, do you require any assistance/adaptations to help you attend?

Yes  No

If Yes, what assistance/adaptations do you require?

**Rehabilitation of Offenders Act 1974**

Have you had any convictions that are spent or not spent under Rehabilitation of Offenders Act?

Yes  No

If Yes, please provide further details:

**Authorization to make deductions from Wages**

I understand that Priority Plus will make deductions from my wages if:

1. There is any money owed as a result of any over payments of wages.
2. There is any other money that is outstanding to the company.

Declaration (Please Tick)

**7. REFERENCES(From two most recent employers who have consented to be approached for a reference on your behalf)**

Referee 1		Referee 2	
Title (Mr., Mrs. Etc)		Title (Mr., Mrs. etc):	
Full Name:		Full Name:	
Job Title:		Job Title:	
Organization:		Organization:	
Address:		Address:	
Town	Post Code	Town	Post Code
Tel No:		Tel No:	
E-mail address:		E-mail address:	
Fax No:		Fax No:	
Please state if we may obtain this reference prior to interview.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please state if we may obtain this reference prior to interview.	<input type="checkbox"/> Yes <input type="checkbox"/> No

**8. DECLARATION**

I declare that the information given in this application form is true and complete. I understand that if I have given any misleading information on this form or made any omissions, this will be sufficient grounds for disqualifying me from registering and terminating my employment with Priority Plus.

Signature:

Date:

Name:

The information provided by you on this form as an applicant will be stored either on paper records or a computer system in accordance with the Data Protection Act 1998 and will be processed solely in connection with recruitment.