



CANDIDATE REGISTRATION FORM

PERSONAL DETAILS

Mr Mrs Miss Ms Full Name: _____

Nationality: _____ Date of birth _____

Full address: _____

Post code: _____

Tel home: _____ Tel mobile: _____

Email: _____

National Insurance Number: _____

Next of Kin: _____ Relationship to You: _____

Tel home: _____ Tel work: _____

Tel mobile: _____

NOK Date of Birth: _____

ELIGIBILITY TO WORK

Are you an EU citizen? Yes No

Do you hold a British or EU passport? Yes No

EVIDENCE IS REQUIRED OF ALL PASSPORTS & VISAS. ORIGINALS WILL BE REQUIRED AT INTERVIEW.

If you do not hold a British/EU passport, do you hold any of the following?

Working Holiday / Youth Mobility Visa? Yes No
Expiry date: _____

UK Residency Visa? Yes No
Expiry date: _____

Student Visa? Yes No
Expiry date: _____

Other (please specify) _____
Expiry date: _____

OWN TRANSPORT / DRIVING LICENCE

(A) Can you drive? Y N

(B) Do you hold a current driving licence? Y N

(C) Own transport Y N

(D) Do you hold Business Insurance Y N

If you have answered "Yes" to A and B above can you please complete and sign the declaration below;

(D) I have provided ARU with a copy of my current Driving License Y N

(E) Any pending endorsements Y N

(F) Licence number: [_____]

I undertake to inform ARU immediately, should there be a change in the above information and supply a copy of my updated licence details immediately upon receipt myself.

Date: [_____] Signature: [_____]

GENERAL INFORMATION

Are you available for work at short notice?.....Yes No

Are you looking for Temporary work?.....Yes No

Are you seeking a Permanent position.....Yes No

Do you need permission to work in the UK?.....Yes No

Do you have any unspent criminal convictions?.....Yes No

If yes, please state convictions and dates;

Do you hold a current CRB.....Yes No

Please give details of your availability to work: NB The care sector has a need to provide care 24 hours a day / 365 days a year:

EDUCATION DETAILS (Including Higher Education)

Date from	Date to	School / College	Qualifications / level gained

QUALIFICATIONS

Please list all qualifications held and training courses undertaken, including NVQ's etc. Please bring the originals to interview where copies will be taken. The certificates will require verification.

Qualification	Place Obtained	Date Obtained

**CARE INDUSTRY
TRAINING**

Please indicate the dates and training for which you have valid certificates:

Course:	Date:	Course:	Date:
Moving & Handling		Safeguarding Vulnerable Adults	
Emergency First Aid		Administration of medication	
Health & Safety		Safeguarding of Children	
		Food Hygiene	

SUPPORTING INFORMATION:

Please provide us with any further information which you feel will support your application to work for ARU. Please provide a summary of your skills, experiences and any personal attributes which you feel will be of benefit to ARU and our service users:

DBS Details

Mothers Maiden Name:

Last 5 years addresses with month and year:

•

•

•

•

•

PREFERRED WORK

How far from home can you travel to work?

What languages can you speak?

REFERENCE DETAILS Please start with your most recent employer and include any voluntary work or any breaks in employment or study. Your last three employers is sufficient so that we can request a reference. If you are a Student or have little experience, please write in the names of two contacts we can approach for a character reference. All referees will be contacted for a written reference prior to you commencing for ARU.

1. Company name: _____

Type of Company: _____

Address: _____

Tel number: _____

Brief Job duties: _____

Employed From: _____ To: _____

Position Held: _____

Supervisor: _____ Reason for leaving: _____

Rate per hour: _____ May we ask for a reference? Y N

2. Company name: _____

Type of Company: _____

Address: _____

Tel number: _____

Brief Job duties: _____

Employed From: _____ To: _____

Position Held: _____

Supervisor: _____ Reason for leaving: _____

Rate per hour: _____ May we ask for a reference? Y N

3. Company name: _____

Type of Company: _____

Address: _____

Tel number: _____

Brief Job duties: _____

Employed From: _____

To: _____

Position Held: _____

Supervisor: _____ Reason for leaving: _____

Rate per hour: _____

May we ask for a reference? Y N

DECLARATIONS

Criminal Records

The work you have applied for is exempt from the Rehabilitations of Offenders Act 1974, which means that all convictions, cautions, reprimands and final warnings on your criminal record need to be disclosed. You are not entitled to withhold information about convictions, which for other purposes may be considered spent. Only relevant convictions and other information will be taken into account so disclosure need not necessarily be a bar to obtaining work with ARU.

Please tick:

Have you ever been convicted by the courts or cautioned, reprimanded or given a warning by the Police? Yes No

Are you aware of any Police enquiries undertaken following allegations made against you, which may have a bearing on your suitability for this post? Yes No

Have you ever had a Police check in another country? Yes No
If so, please provide details below and enclose a copy if held.

If you have answered yes to any of the above, please give details below.

The cost of a current DBS (Enhanced) is currently £53.20.

50% is payable at interview, with the remainder of the balance being deducted from your first monthly wage.

Please note that if at any stage whilst working for ARU we receive a CRB Enhanced Disclosure that highlights information you have not declared, then you will be removed from your assignment.

Declarations

1. I understand that if I am charged or cautioned after signing this declaration, I must inform ARU.
2. Have you ever been subject to disciplinary action or are currently being investigated due to alleged misconduct?
Yes No
3. I acknowledge that I have been given a copy of the Terms and Conditions of Service issued by ARU, which is mine to keep, and furthermore that I have read those Terms and Conditions and agree to abide by them.
4. I acknowledge and confirm that ARU is authorised to apply for and obtain references from any previous employers and educational establishments.
5. I am not aware of any condition, medical or otherwise, which would affect or limit my employment or performance, other than those declared in my Occupational Health Questionnaire.
6. I declare that the information given herein is true and complete and is not presented in a way intended to mislead. I agree that if I have given false or misleading information or omit to give relevant information now or in the future that ARU may cease to offer me further agency placements without notice, as well as a claim for recovery of any payments I have received, together with a claim for a loss of profit to ARU.
7. I acknowledge that my personal details will be stored and handled correctly by ARU in accordance with the Data Protection Act 1998 however, I agree that they may be made available for audit/review by relevant organisations, e.g. NHS PASA, Care Quality Commission and, where applicable, ARU clients. (This is relevant for all information including all documents - CRB, Occupational Health, References).
8. I understand that if I am working on a student visa I can only work for 20 hours per week during term time. I understand that I have a responsibility to monitor this. In addition, if my position as a student changes, I must inform ARU.
9. I understand that if I am on a Tier 1 Sponsorship Visa, I can only work for a maximum of 20 hours per week at the same professional level as my sponsorship. I understand that I have a responsibility to monitor this. In addition, if my position with my sponsored company changes, I must inform ARU.
10. I confirm that I am not disqualified from working with children, or subject to any sanctions imposed by a regulatory or professional body, e.g. Ofsted or the General Social Care Council.
11. I acknowledge that if any of my details stated on this Application Form change, I must inform ARU immediately.

DATA PROTECTION STATEMENT

The information that you provide on this Form and on a CV given will be used by ARU to provide you with a recruitment service. In providing this service to you, you consent to your personal data being included on a computerised database and consent to us transferring your personal details to our clients. We may check the information collected with a third parties or with other information held by us. We may also use or pass to certain third parties information to prevent or detect crime, to protect public funds or in any other way permitted or required by law.

I hereby confirm that the information given is true and correct. I consent to my personal data and CV being forwarded to clients. I consent to the outcome of references being passed onto potential employers.

Signed:

DATE:

EQUAL OPPORTUNITIES STATEMENT

ARU is committed to a policy of equal opportunities for all work seekers and shall adhere to such a policy at all times and will review on an on-going basis on all aspects of recruitment to avoid unlawful or undesirable discrimination. We will treat everyone equally irrespective of sex, sexual orientation, marital status, age, disability, race, colour, ethnic or national origin, religion, political beliefs or membership or non-membership of a Trade Union and we place an obligation upon all staff to respect and act in accordance with the policy.

ARU shall not discriminate unlawfully when deciding which candidate/temporary worker is submitted for a vacancy or assignment, or in any terms of employment or terms of engagement for temporary workers. ARU will ensure that each candidate is assessed only in accordance with candidate's merits, qualifications and ability to perform the relevant duties required by the particular vacancy. To help us monitor the effectiveness of this policy you are requested to complete this optional section.

ETHNIC CATEGORY

Please note the ethnic questions are not about nationality, place of birth or citizenship. UK citizens can belong to any of the ethnic categories indicated.

Please tick the box which best describes the ethnic category to which you belong.

White British Irish Other White

Mixed White and Black Caribbean White and Black African White and Asian
 Other mixed

Asian or Asian British Indian Pakistani Bangladeshi Other Asian

Black or Black British Black Caribbean Black African Other Black

Chinese or Chinese British or other ethnic group: Chinese Other ethnic group

Gender: Please tick appropriate box Male Female

Date of Birth / / Age

Disability: Please state if you have any long term physical or mental condition that affects your ability to carry out day to day activities Yes No

OFFICE USE ONLY

Interview notes

Proof of permission to work (please tick as appropriate)

- (a) EEA passport / National Identity Card
- (b) UK Standard Birth Cert
- (c) Certificate of Naturalisation
- (d) Certificate of Adoption
- (e) Proof of NI
- (f) Non-EAA Nationality Home Office Papers UKRP Residence Permit Pass Port / Visa

Interview summary

CONSULTANT NAME[_____]

CONSULTANT SIGNATURE[_____]

DATE TERMS of ENGAGEMENT GIVEN