

APPLICATION FORM – Confidential

Please complete all parts of this application form in full using black ink

1 VACANCY DETAILS

Post Applied for:	Location:	Closing Date:
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2 PERSONAL DETAILS

Title	Surname	First Name(s)
Address		Home Tel
		Mobile Tel
		Email
Post Code	Work Tel	

3. EDUCATION AND QUALIFICATIONS

Including Professional and Vocational Qualifications. Please state most recent qualification first.

School/College/University	From	To	Subject/Qualification obtained	Grade

4. CURRENT STUDY

Please detail any study you are currently undertaking

School/College/University	Subject/Qualification	Expected Completion and Grade

5. MEMBERSHIP OF PROFESSIONAL INSTITUTIONS / ORGANISATIONS

Name of Institute / Organisation and level of membership	Date

8. INFORMATION IN SUPPORT OF YOUR APPLICATION

Please study the Person Specification and Job Description, telling us how your qualifications, skills and experience make you suited to this post, even if a CV is included.

9. REFERENCES

Please give the names of people who have agreed to supply references. For all positions you must provide 2 references. If you are, or have been, employed these should be your two most recent employers, your line manager or someone in a position of responsibility who can comment on your suitability for the post. If you are a student please provide contact details of a teacher at your school, college or university. Please note that personal references such as friends and relatives are not acceptable. All referees will be approached prior to interview unless you indicate otherwise.

REFERENCE 1	REFERENCE 2
Name	Name
Address	Address
Post Code	Post Code
Telephone	Telephone
Email	Email
Can be contacted Yes <input type="checkbox"/> No <input type="checkbox"/>	Can be contacted Yes <input type="checkbox"/> No <input type="checkbox"/>
In what capacity do you know this person?	In what capacity do you know this person?

10. PROFESSIONAL IDENTIFICATION

Professional Identification Number, e.g. NMC (if appropriate)	Expiry Date
Are you currently the subject of a fitness to practise investigation or proceedings by a licensing or regulatory body in the UK or in any other country? If yes, please provide details on a separate sheet.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever been removed from the register or have conditions ever been made on your registration by a fitness to practise committee or the licensing or regulatory body in the UK or in any other country? If yes, please provide details on a separate sheet.	Yes <input type="checkbox"/> No <input type="checkbox"/>

11. ADDITIONAL INFORMATION

Do you require a work Permit to work in the UK	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you hold a current UK Passport	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you hold a current UK Driving Licence	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have any convictions, cautions, reprimands or final warnings that are not "protected" as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013) by SI 2013 1198'. Please give details as failure to disclose will result in your application being declined.	
If you have a disability please tell us about any adjustments we may need to make to assist you at interview	
Please tell us if there are any dates when you will not be available for interview	
<i>I can confirm that to the best of my knowledge the above information is correct. I accept that providing deliberate false information could result in my dismissal.</i>	

12. ADDITIONAL NOTES

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12. DECLARATION

I understand that the appointment, if offered, will be subject to information given on this form and I agree that any deliberate omission, falsification or misrepresentation in the application form will be grounds for rejecting this application or subsequent dismissal if employed by Butterfly Home Help.	
Signature	Date:

Please return completed application form to:

**The HR / Training Manager
Butterfly, Wessex House. 40 Station Road, Westbury, Wiltshire. BA13 3JN**