



**Specialist Qualifications** *Please summarise your record of training and specialist courses which are relevant to the position.*

**Details of membership of professional bodies**

**Registration numbers (NMC Pin, ISA, SSSC) Please include expiry dates**

**If you are related to an employee of Young Foundations:**

Please state their name(s):

Please state their job title(s):

.....  
.....

**List all language(s) you speak and understand** *(tick the boxes that best describe your skill level)*

Language	Speak Some	Speak Fluently	Read	Write
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

**Employment Status**

Do you require a Work Permit\* to work in the UK *(please tick as appropriate)*: YES NO

Please state Nationality:

*N.B. \*Work Permits are not transferable between employers and any job offer made will be subject to obtaining a new permit.*

.....

**Employment History** *Please give a full history since leaving school. Please give details of your present job or, if unemployed, your last job (please state if unemployed).*

Present employer name:

Start date:

Address:

Notice period/date last job ended:

Reason for leaving:

Salary/Wage:

Job title:

Telephone:

Outline of responsibilities *(make particular reference to responsibilities which match this post):*

.....  
.....  
.....  
.....  
.....  
.....  
.....

## Previous Employment

Please start with your last job and continue on a separate sheet if necessary (continued on next page).

Company Name:	Job Title:
Address:	
Telephone:	Email:
Outline of responsibilities:	
Employment Date From (dd/mm/yy):	To (dd/mm/yy):
Salary/Wage:	Reason for leaving:

Company Name:	Job Title:
Address:	
Telephone:	Email:
Outline of responsibilities:	
Employment Date From (dd/mm/yy):	To (dd/mm/yy):
Salary/Wage:	Reason for leaving:

Company Name:	Job Title:
Address:	
Telephone:	Email:
Outline of responsibilities:	
Employment Date From (dd/mm/yy):	To (dd/mm/yy):
Salary/Wage:	Reason for leaving:

Company Name:	Job Title:
Address:	
Telephone:	Email:
Outline of responsibilities:	
Employment Date From (dd/mm/yy):	To (dd/mm/yy):
Salary/Wage:	Reason for leaving:

(continued on next page)

## Previous Employment *(continued)*

Company Name:

Job Title:

Address:

Telephone:

Email:

Outline of responsibilities:

Employment Date From (dd/mm/yy):

To (dd/mm/yy):

Salary/Wage:

Reason for leaving:

*(Please continue on a separate sheet if necessary)*

## Employment Gaps

*Please explain any gaps in your employment history.*

Employment Gap From (dd/mm/yy):

To (dd/mm/yy):

Reason for Employment Gap:

Employment Gap From (dd/mm/yy):

To (dd/mm/yy):

Reason for Employment Gap:

Employment Gap From (dd/mm/yy):

To (dd/mm/yy):

Reason for Employment Gap:

Employment Gap From (dd/mm/yy):

To (dd/mm/yy):

Reason for Employment Gap:

*(Please continue on a separate sheet if necessary)*

## Additional information

*Use this space to tell us more about yourself, highlighting any personal attributes and experience relevant to the position for which you are applying. Your answer should reflect competencies required for this post.*

**Hobbies and Interests** *Please tell us about any hobbies or interests you may have.*

**Reference No.1** *(Must be your most recent or current employer)*

Name: ..... Job Role: .....

Company Name: .....

Company Address: .....

Telephone: ..... Email: .....

May references be taken up before interview: *(please tick as appropriate)* YES NO

**Reference No.2** *(Must not be a relative)*

Name: ..... Job Role: .....

Company Name: .....

Company Address: .....

Telephone: ..... Email: .....

Capacity in which referee is known: .....

May references be taken up before interview: *(please tick as appropriate)* YES NO

**Reference No.3** *(Must not be a relative)*

Name: ..... Job Role: .....

Company Name: .....

Company Address: .....

Telephone: ..... Email: .....

Capacity in which referee is known: .....

May references be taken up before interview: *(please tick as appropriate)* YES NO

(please circle as appropriate)

Are you currently the subject of any investigation or proceeding by any body having regulatory functions in relation to health/social care professionals including such regulatory body in another country:

YES NO

If YES, please give details below:

Have you ever been disqualified from practice of a profession or required to practice it subject to specified limitations following a fitness to practice investigation by a regulatory body, in the UK or another country:

YES NO

If YES, please give details below:

## Declaration

I understand that failure to disclose information or the provision of incorrect information may result in an offer of employment being withdrawn or disciplinary action being taken leading to dismissal at a later date. I give the company the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the company and its representatives for seeking such information and all other persons, corporations or organisations for providing such information.

I understand that it is an offence to apply for this role if I am barred from engaging in regulated activity relevant to children.

**I CERTIFY THAT I HAVE READ AND UNDERSTOOD THE ABOVE AND THAT THE INFORMATION I HAVE GIVEN IS TRUE, ACCURATE AND FORMS A COMPLETE RECORD.**

Signature:

Date:

## Young Foundations

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