

**Application for Employment
Eskdail Medical
Prospect House
121 Lower Street
Kettering, Northants, NN16 8DN**

This form may not include space for relevant information that you think we should be aware of – if so please include a separate statement

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by law.

Applicant full name: Mr/Mrs/Ms/Miss _____

Position(s) applied for: _____

Address: _____

_____ Postcode _____

Contact telephone: _____

Date you would be available to start work: _____

Do you have any objection to working overtime if necessary? Yes ___ No ___

Do you have any unspent criminal convictions, or is there any other information we should be aware of in the context of your possible employment here?

Yes ___ No ___ -- If yes please explain in a separate note

Employment History

Please provide all employment information for the past three employers starting with the most recent.

1.
Employer: _____ Position held: _____

Address: _____ Telephone _____

Immediate supervisor and title: _____

Dates employed: from _____ to _____ Salary: _____

Job summary: _____

Reason for leaving: _____

2.

Employer: _____ Position held: _____

Address: _____ Telephone: _____

Immediate supervisor and title: _____

Dates employed: from _____ to _____ Salary: _____

Job summary: _____

Reason for leaving: _____

3.

Employer: _____ Position held: _____

Address: _____ Telephone: _____

Immediate supervisor and title: _____

Dates employed: from _____ to _____ Salary: _____

Job summary: _____

Reason for leaving: _____

Other Skills and/or professional qualifications

State any *job-related* training, skills, certificates or other qualifications:

(If this is an application for nursing employment, please state your relevant pin number)

Educational History

Secondary school name: _____

List GCSE or similar qualifications and year obtained

Further education

College/University: _____

Qualifications obtained and year: _____

Please give details of any medical condition or treatment which is significant or has caused you loss of working time in the past 3 years.

Please list some of your leisure activities/hobbies/interests

References

List two references: names, position, address and contact telephone numbers

1.

2.

Referees may be contacted: **Before Interview/After Interview/after Job Offer**
(Please delete as applicable)

I hereby authorise the potential employer to contact, obtain, and verify the accuracy of information contained in this application from the references above and all previous employers. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organisations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

I have read and fully understand the above conditions and confirm that I seek employment under these conditions.

Applicant signature: _____ Date: _____