

**Rowans Hospice Application Form**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| The information provided on this form will be used by Rowans Hospice to assess your suitability for the role you have applied for and subsequently manage the employment contract or volunteer relationship. You do not have to provide what we ask for but it might affect your application or the way in which we can support you if you don’t. For further details on how we use your information, please see our Privacy Notice which can be found on our website [www.rowanshospice.co.uk](http://www.rowanshospice.co.uk) | | | | | | | | | | | | | | | | | | | | | |
| **Position applied for:** | | | | | | | | | | | | | | | | | | | | | |
| **1. Personal Details** | | | | | | | | | | | | | | | | | | | | | |
| Title: (Mr/Mrs/Miss/Ms) | | | | | | | | | Surname: | | | | | | | | | | | | |
|  | | | | | | | | | Forename: | | | | | | | | | | | | |
| Tel No: (Home) | | | | | | | | | Address: | | | | | | | | | | | | |
| (Work ) | | | | | | | | |  | | | | | | | | | | | | |
| (Mobile) | | | | | | | | |  | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | |
| Email Address: | | | | | | | | | Post Code: | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | |
| **2. Education** | | | | | | | | | | | | | | | | | | | | | |
| School/College  F.E./University | | | Dates  From To | | | | | | Subjects studied or Qualifications gained | | | | | | | | Grade | | | | Date  Obtained | |
|  | | |  | |  | | | |  | | | | | | | |  | | | |  | |
| **3. Professional/Technical Qualifications or Membership** | | | | | | | | | | | | | | | | | | | | | | |
| Professional Body or Training Establishment | | | Dates  From To | | | | | | Qualification or Grade Membership | | | | | | | | Registration  Enrolment Number | | | | | |
|  | | |  | | |  | | |  | | | | | | |  | | | | | | |
| **4. Employment/Volunteering Details**  Please record the details of your previous employment or volunteering beginning with the most recent first, and giving full career history details. Please explain any gaps in employment in the ‘Supporting Information’ section below. | | | | | | | | | | | | | | | | | | | | | |
| Employer/  Volunteer organisation  (Most recent first) | | Position Held | | | | | | Dates  From To | | | | | | Salary/Grade | | | | | Reason for  Leaving | | |
|  | |  | | | | | |  | | | | |  |  | | | | |  | | |
| **5. References** | | | | | | | | | | | | | | | | | | | | | |
| Please provide details of the people who have agreed to supply references. For all positions written references obtained must cover the preceding seven years of employment. If you are, or have been employed, these should be your recent employers and may include your line manager or People Services Department. If you are unable to provide a work reference, please provide character references. This should be people who know you in a professional capacity. Personal references such as friends and relatives are not acceptable. **If you are a volunteer** you are only required to provide two referees, if possible your current or recent employer and a character reference. If you are a student please provide contact details of a teacher at your school college or university. | | | | | | | | | | | | | | | | | | | | | |
| **Reference 1** | | | | | | | | | | | | | | | | | | | | | |
| Name: | | | | | | | | | | | Job title: | | | | | | | | | | |
| Address: | | | | | | | | | | | | | | | | | | | | | |
| Email: | | | | | | | | | | | Telephone Number: | | | | | | | | | | |
| Relationship: | | | | | | | | | | | | | | | | | | | | | |
| **Reference 2** | | | | | | | | | | | | | | | | | | | | | |
| Name: | | | | | | | | | | | Job Title: | | | | | | | | | | |
| Address: | | | | | | | | | | | | | | | | | | | | | |
| Email: | | | | | | | | | | | Telephone Number: | | | | | | | | | | |
| Relationship | | | | | | | | | | | | | | | | | | | | | |
| **Reference 3** | | | | | | | | | | | | | | | | | | | | | |
| Name: | | | | | | | | | | | Job Title: | | | | | | | | | | |
| Address: | | | | | | | | | | | | | | | | | | | | | |
| Email: | | | | | | | | | | | Telephone Number: | | | | | | | | | | |
| Relationship: | | | | | | | | | | | | | | | | | | | | | |
| **Reference 4** | | | | | | | | | | | | | | | | | | | | | |
| Name: | | | | | | | | | | | Job Title: | | | | | | | | | | |
| Address: | | | | | | | | | | | | | | | | | | | | | |
| Email: | | | | | | | | | | | Telephone Number: | | | | | | | | | | |
| Relationship: | | | | | | | | | | | | | | | | | | | | | |
| **Reference 5** | | | | | | | | | | | | | | | | | | | | | |
| Name: | | | | | | | | | | | Job Title: | | | | | | | | | | |
| Address: | | | | | | | | | | | | | | | | | | | | | |
| Email: | | | | | | | | | | | Telephone Number: | | | | | | | | | | |
| Relationship: | | | | | | | | | | |  | | | | | | | | | | |
| **Please continue on a separate sheet if necessary**  **6. Supporting Information**  Please give your reasons for applying for this position and additional information which shows how you match the person specification or volunteer role guide. This can include relevant skills, knowledge, experience, voluntary activities and training etc.  **Please continue on separate sheet if necessary.** | | | | | | | | | | | | | | | | | | | | | |
| Do you have a current clean driving licence? Yes No  Do you own a vehicle? Yes No  Have you applied for a position at the Rowans Hospice previously? Yes No  If yes, please state position and approximate date of application:  ………………………………………………………………………………………………………………………………………………………………………  Are you related to an employee or volunteer of the Rowans Hospice? Yes No  If yes, please state their name and relationship to you:  ………………………………………………………………………………………………………………………………………………………………………  Where did you see this position advertised?  Hospice Website Search Engine Other Website  Current Employee / Volunteer of Rowans Other  If other please state: ……………………………………………………………………………………………………………………………………. | | | | | | | | | | | | | | | | | | | | | |
| **7. Criminal Convictions** | | | | | | | | | | | | | | | | | | | | | |
| Owing to the vulnerability of people receiving health care, all employee and volunteer roles are exempt from the provisions of Section 4 (2) of the Rehabilitation of Offenders Act. Details of any criminal convictions you may have should therefore be stated below. Failure to disclose this information will result in action being taken. If this does not apply, please write ‘None’ in the space below. | | | | | | | | | | | | | | | | | | | | | |
| **8. Declaration** | | | | | | | | | | | | | | | | | | | | | |
| The information in this form is true and complete. I understand that if it is subsequently discovered any statement is false or misleading, or that I have withheld relevant information, my application may be disqualified or, if I have already been appointed, I may be dismissed.  I agree to the above declaration.  Signed: ………………………………………………….................................. Date: ………………………………………………………… | | | | | | | | | | | | | | | | | | | | | |
| **9. Volunteer Positions Only (**Please tick your areas of interest): | | | | | | | | | | | | | | | | | | | | | |
| Ward  Fundraising/Events  Fundraising/Clerical  Driving – Patients  Driving – Errands  Day Care  Living Well Centre  PAT Dogs  Clerical  Visitors Reception  Patient Reception  Phone Reception  Gardening    Coffee Shop  Flower Room | | | | | | | | | | Meerkats \*  Hospice Companion \*  Veterans Companion  Bereavement Volunteer \*  Retail Sales Assistants  Retail Stock Processor  Retail Van Driver/Porter  Qualifications required for the following roles:  Hairdresser /Barber    Manicurist  Podiatrist  Complementary Therapy  \* Training Provided | | | | | | | | | | | |
| **9. Volunteer Positions Only (**Please provide your availability below): | | | | | | | | | | | | | | | | | | | | | |
| Day | AM | | | PM | | | Eve | | | | | Day | | | AM | | | PM | | Eve | |
| Monday |  | | |  | | |  | | | | | Friday | | |  | | |  | |  | |
| Tuesday |  | | |  | | |  | | | | | Saturday | | |  | | |  | |  | |
| Wednesday |  | | |  | | |  | | | | | Sunday | | |  | | |  | |  | |
| Thursday |  | | |  | | |  | | | | | Bank Holiday | | |  | | |  | |  | |