



Spa Nursing Home Group
 comprises of 7 Nursing Care
 Homes in Belfast, Ballynahinch,
 Banbridge, Carryduff & Crumlin.

Fair Employment Number (for office use only):

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Job Title		Location		Closing Date & Time	
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PLEASE READ THE 'APPLICANT GUIDANCE' BOOKLET BEFORE FULLY COMPLETING THE APPLICATION

1. PERSONAL DETAILS

Title Mr/Mrs/Miss	Surname	Forenames
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Home Address:

..... Postcode:

Contact Telephone Numbers (You must provide at least one contact telephone number)

Home Mobile

Email Address:

Please mark an X where appropriate:

	YES	NO
1. Do you hold a FULL current driving licence?	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you have access to a form of transport which would enable you to carry out the duties of the post?	<input type="checkbox"/>	<input type="checkbox"/>

2. Only Nurses & Nursing Care Assistant applicants should complete this section

Care Assistants Northern Ireland Social Care Council (NISCC) Registration Number:

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Nurses Nursing and Midwifery Council (NMC) Pin Number:

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Or date pin expected: _____

Do you have any live sanctions or ongoing referrals to NISCC, NMC or any other regulatory body? Yes No

3. EDUCATION & QUALIFICATIONS

Level of Qualification (GCSE, A 'Level, Degree, NVQ/QFC etc.)	Subject (Maths, English, Nursing, Health & Social Care etc.)	Result(s) Obtained

B) Employment Record

Company Name:	Start date: (DD/MM/YY)	End date: (DD/MM/YY)
FULL Address:	Rate of Pay	Notice Period
	Job Title	
Postcode	Reason for leaving:	

Please provide a brief Outline of your duties & responsibilities:

.....

.....

.....

C) Employment Record

Company Name:	Start date: (DD/MM/YY)	End date: (DD/MM/YY)
FULL Address:	Rate of Pay	Notice Period
	Job Title	
Postcode	Reason for leaving:	

Please provide a brief Outline of your duties & responsibilities:

.....

.....

.....

D) Employment Record

Company Name:	Start date: (DD/MM/YY)	End date: (DD/MM/YY)
FULL Address:	Rate of Pay	Notice Period
	Job Title	
Postcode	Reason for leaving:	

Please provide a brief Outline of your duties & responsibilities:

.....

.....

.....

5. Employment Gaps	From (Date)	To (Date)	Reason
<p>Our governing body, the Regulation & Quality Improvement Authority (RQIA) require all applicants to provide a full and comprehensive employment history. In addition to details regarding all previous periods of employment applicants are required to provide details relating to any periods, longer than one month, when they were not in paid employment.</p> <p>Examples of such periods may include time away from work to care for a child or relative, time spent in education or training, periods spent travelling or volunteering at home or abroad, time away from work due to ill health, or periods of unemployment when you were actively seeking work.</p> <p>Please provide details for each period of time spent not in employment below.</p>			

6: AVAILABILITY TO WORK
***** THIS SECTION WILL BE USED FOR SHORTLISTING PURPOSES *****

The **minimum** number of hours I can work per week: hours

The **maximum** number of hours I can work per week hours

Please place AN X IN THE BOXES BELOW ACCORDING TO THE JOB ROLE YOU ARE APPLYING FOR CONFIRMING THE HOURS YOU WILL BE AVAILABLE TO WORK:

Registered General Nurse and Care Assistant applicants							
I am available to work	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Fully flexible – I can work anytime							
8am-8pm (Days)							
8pm-8am (Nights)							
8am-2pm (Mornings)							
2pm-8pm (Evenings)							
GENERAL ASSISTANT applicants							
I am available to work	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Fully flexible – I can work anytime							
9am – 1pm							
9am – 5pm							
8am – 2pm							
Cook applicants							
I am available to work	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
8am-5pm							
9am – 6pm							
Activity Therapist and Maintenance / Gardener applicants							
I am available to work	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
10am- 1pm							
10am-4pm							

Note: You will not be required to work all of the hours / days that you are available - adequate rest days / periods will be scheduled in line with current legislation. If shortlisted your availability will be further discussed with you at interview.

7. REFERENCES

*****THIS SECTION WILL BE USED FOR SHORTLISTING PURPOSES*****

- You must provide **full** contact details for three referees
- We reserve the right to approach any past employer for a reference
- If you have previously been in paid employment one of your referees **MUST** be your present or most recent employer. The referee you provide must have been responsible for supervising or managing your work.
- If you have never been in paid employment, please supply the details of **three** character and / or academic referees. *It is preferred that the referees have known you for longer than one year.*
- All referees for qualified nurses must be professionals
- **ALL** references must be supplied in English. Where this is not possible it will be the applicant's responsibility to provide a certified translation.
- Referees must not be related to you by birth or marriage

SECTIONS MARKED WITH AN * asterisk MUST BE COMPLETED IN FULL

REFEREE 1 - in what capacity are you known to the referee?	
Work <input type="checkbox"/>	Character <input type="checkbox"/>
Academic <input type="checkbox"/>	
*Name	Company name (if applicable)
Position (if work or Academic)	*Address:
*Tel No:
Email	*Postcode
REFEREE 2 - in what capacity are you known to the referee?	
Work <input type="checkbox"/>	Character <input type="checkbox"/>
Academic <input type="checkbox"/>	
*Name	Company name (if applicable)
Position (if work or Academic)	*Address:
*Tel No:
Email	*Postcode
REFEREE 3 - in what capacity are you known to the referee?	
Work <input type="checkbox"/>	Character <input type="checkbox"/>
Academic <input type="checkbox"/>	
*Name	Company name (if applicable)
Position (if work or Academic)	*Address:
*Tel No:
Email	*Postcode

8. HANDLING & ASSESSING CRIMINAL CONVICTION INFORMATION

If short-listed for interview you will be required to apply for an Enhanced Access NI disclosure. Due to the nature of the work that you have applied for this will result in convictions which may normally be considered as spent being disclosed in addition to unspent criminal convictions, with the exception of filtered information.

Please note: it is a criminal offence for any person who has been ‘barred’ from working with adults to apply for a post which involves carrying out regulated activity with adults.

Are you currently subject to inclusion on the ADULTS BARRED LIST? YES NO

‘Regulated’ and ‘Previously Regulated’ Activity Positions

For the purposes of our employment, ‘Regulated’ posts include Nurse Managers, Nurses and Care Assistants. For these posts, an Enhanced Disclosure **and** a check of the Adult Barred List will be required.

Posts that are no longer considered ‘Regulated’ activity, include General/ Domestic Assistant, Activity Therapist, Maintenance Person/Gardener, Cook and Receptionist. Applicants for these posts will require Enhanced Disclosure only.

If an offer of employment is made, and accepted, we will require your consent to process your application for an Enhanced Access NI disclosure and carry out a check of the Adults Barred List (if applicable).

You can request a copy of our policy on the Handling & Assessing of Criminal Conviction information from Human Resources via the below contact details.

9. DECLARATION OF CONSENT – PLEASE READ CAREFULLY

I consent to the organisation obtaining references and carrying out a check of the Adults Barred List (if applicable) to support this application once an offer has been made and accepted, either verbally or in writing, and release the organisation and referees from any liability caused by giving and receiving information.

I confirm that the information given on this form is, to the best of my knowledge, true and complete. Any false statement or omission may be sufficient cause for rejection or, if employed, dismissal.

Signature / or typed if by email:

Print Name:

Date:

**Please return this form to: Spa Nursing Homes Ltd, Human Resources Department,
18 Orby Link, Belfast, BT5 5HW or via email to hr@spanursing.co.uk**

**If you have any questions about the information requested, or require support in completing your application our HR department can be contacted on:
Tel: 028 9070 7628 email: hr@spanursing.co.uk**



Private and Confidential Fair employment Questionnaire

Fair Employment Number
(Office use only)

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Position Applied for: _____

Date: _____

We are an Equal Opportunities Employer. We do not discriminate against our job applicants or employees and we aim to select the best person for the job. We monitor the community background and sex of our job applicants and employees in order to demonstrate our commitment to promoting equality of opportunity in employment and to comply with our duties under the Fair Employment & Treatment (NI) Order 1998.

You are not obliged to answer the questions on this form and you will not suffer any penalty if you choose not to do so. Nevertheless, we encourage you to answer these questions. Your answers will be used by us to prepare and submit a monitoring return to the Equality Commission, but your identity will be kept anonymous. In all other regards your answers will be treated with the strictest confidence. We assure you that your answers will not be used by us to make any decisions affecting you, whether in a recruitment exercise or during the course of any employment with us.

1. Community Background

Regardless of whether they actually practice religion, most people in Northern Ireland are perceived to be members of either the Protestant or Roman Catholic communities.

Please indicate the community to which you belong by ticking the appropriate box below:

I am a member of the Protestant community

I am a member of the Roman Catholic community

I am not a member of either the Protestant or Roman Catholic communities

If you do not answer the above question, or if you tick the "not a member of either" box, we are encouraged to use the residuary method of making a determination, which means that we can make a determination as to your community background on the basis of the personal information supplied by you in your application form/personnel file.

2. Sex

Please indicate whether you are: Female

Male

Note: If you answer this questionnaire you are obliged to do so truthfully as it is a criminal offence under the Fair Employment (Monitoring) Regulations (NI) 1999 to knowingly give false answers to these questions.

Please complete this form and place it in a sealed envelope marked 'Monitoring Officer'.
It should then be returned along with your completed Application Form.