

Alpha Care Specialists

Homecare Services at its Best

Community House
311 Fore Street, Edmonton
London N9 0PZ

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Website: www.alphacares.org.uk



Please complete this Application Form by using black, dark blue ink, a ballpoint, or a typewriter. Further sheets may be used as desired. Please number them. All sections of the form must be completed as fully as possible.

JOB APPLYING FORPERSONAL CARE ASSISTANT

PERSONAL DETAILS

SURNAME	OTHER NAMES	PREFERRED TITLE e.g. Mrs/Ms/Mr etc.
ADDRESS	TELEPHONE NUMBER Home: Business: May we contact you at work? National Insurance No.	
	Current Full Driving Licence? YES/NO	Vehicle Owner YES/NO
Two references required. If your present or most recent employer is not included as a referee are you willing for a reference to be taken? YES / NO	NOTE: References will normally be taken up before interview. Please indicate if you do not want either reference to be taken up at this stage and why. Please indicate if your referees know you by another name.	
NAME: ADDRESS: TELEPHONE: OCCUPATION:		
NAME: ADDRESS: TELEPHONE: OCCUPATION:		

Alpha Care Specialists is a Company Limited by Guarantee (England & Wales) Company Registration No. 3957802. Registered Office: As above *Registered Charity Number 1084004*



Reviewed 2018



EDUCATION

Please give details of Schools, Colleges etc. attended, excluding primary schools, but including professional and technical training.

Full time education – please show schools attended from age 11.

*Dates
From To*

*Examinations passed.
Please show dates of passing and grade.*

Further/higher education – college, university, correspondence courses etc

*Dates
From To*

*Examinations passed.
Please show date of passing and grade*

Short courses attended/other training undertaken

Studies/training in progress

Membership of professional bodies or institutions

NOTE: Evidence of qualifications will be required prior to appointment

CURRENT OR MOST RECENT EMPLOYMENT

NAME and ADDRESS	POST TITLE	DATE APPOINTED	SALARY/GRADE
		DATE OF LEAVING	

Brief outline of aims and duties of post

Why are you seeking to change your present post/why did you leave your previous post?

Period of notice required in present post.

**PREVIOUS EMPLOYMENT - attach further sheet if necessary
(PLEASE ACCOUNT FOR ANY GAPS IN YOUR EMPLOYMENT HISTORY)**

Name and Address - please show most recent first.	Post Title and brief description of duties	DATES From To	SALARY/ GRADE

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SUPPORTING STATEMENT

Please detail your relative experience to date and any other factors you consider fit you for this post. (Further sheets may be used as desired).

Interests outside work.

Alpha Care Specialists reserves the right to make any such checks including via the police or otherwise into the background of anyone to whom we offer employment.

I understand that canvassing of any member of Alpha Care Specialists directly or indirectly, for any appointment, would disqualify my application

The information provided is correct to the best of my knowledge.

Signed:

Date:

Please state the publication in which you saw the vacancy advertised:

