ASD UNIQUE SERVICES LLP

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**JOB APPLICATION FORM Please note: Applications must be received by ..............................**

**Position Applied For: ………………………………… How did you hear of the Vacancy: .……………..….**

**..**

**Name: ...............................................................................................................................................**

**Address: ...............................................................................................................................................**

**Post Code ..............................Telephone (Home) ....................................Mobile…….................................**

**Email address .............................................................................................................................................**

**National Insurance Number: \_\_\_\_/ \_\_\_\_\_/ \_\_\_\_\_\_/ \_\_\_\_\_\_/ \_\_\_ Are you over the age of 18? Yes/No**

*Please tick the statements that apply to you:*

|  |  |
| --- | --- |
| **I have experience working with challenging behaviour and complex needs** |  |
| **I have worked with adults or children with learning difficulties** |  |
| **I have experience in the field of working with adults or children with Autism** |  |
| **I have completed Autism specific training** |  |
| **I enjoy working with challenging behaviour and complex needs** |  |
| **I would prefer not to work with challenging behaviour and complex needs** |  |
| **I have completed MDS training (state which year)** |  |
| **I am available to do sleep-ins if necessary** |  |

*Please note: You will be required to provide proof of any further education qualifications at interview stage.*

**Do you own a car? YES/NO Do you hold a clean Full UK Driving Licence? YES/NO**

*If the answer is no, please give accurate details:*

**.......................................................................................................................................................................**

**Details of Qualifications/ Education/ School/ College:**

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| --- | --- | --- |
| **TYPE OF QUALIFICATION** | **YEAR GAINED** | **ESTABLISHMENT** |
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**Current Employer Name & Address: ….......................................................................................................**

**Position held and responsibilities:**

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|  |

**If offered this position do you intend to continue working for any other organisation? YES/NO**

**Would you be willing to complete a D.B.S Check? YES/NO**

**Please note: Individuals who have previously obtained a DBS check must be subscribed to the DBS Tracking Service (see** [**www.gov.uk/dbs**](http://www.gov.uk/dbs) **for more details).**

**Are you subscribed to the Update Service? YES/NO**

**Do you have a Criminal Record or have you ever been convicted or or cautioned by the Police? YES/NO** *If the answer is yes, please supply accurate details:*

**.......................................................................................................................................................................**

*Because of the nature of the work involved, this post is exempt from the provisions of the Rehabilitation of Offenders Act. Your entitlement to withhold any information which for other purposes is “spent” does not therefore apply. In the event that this disclosure is found to be false any offer of employment will be terminated immediately. Any information disclosed on this application will be treated as strictly confidential.*

*We are committed to increase the number of disabled people we employ. To support this aim, we need to know if candidates may have a disability that requires adjustments to be made to our recruitment process.*

**If you are disabled, are there any reasonable adjustments which you feel should be made to the recruitment process to assist you in your application for the job? YES/NO**

**Employment History**

*Please list all employment since leaving School, also explain any gaps in employment. List all information with the most recent first, with month and year specified. Continue on a separate sheet if necessary.*

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| --- | --- | --- | --- |
| **DATES** | **COMPANY**  **NAME AND ADDRESS** | **JOB TITLE** | **REASON FOR LEAVING** |
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**Please state two referees in the space provided below:**

* We require at least one reference from your current or most recent employer, (if the applicant has been with his/hers present employer for 18 months or less, from his/her previous employer also.)
* Along with one other person who may provide credible comment on your ability to do the job. Please state if you have supplied a name for a character reference. Any character referees should have known you for approximately 2 years.

1. **Name:...............................................................................Address:........................................................**

**………………………………………..............................................Post Code:............................................**

**Telephone number:..................................... Email: …………………………………………………………**

1. **Name:...............................................................................Address:.........................................................**

**………………………………………..............................................Post Code:............................................**

**Telephone number:..................................... Email: …………………………………………………………**

**What responsibilities do you think the position you are applying for entails?** *(In other words, please write your own job description)*

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|  |

**Please indicate if you agree to us requesting references on acceptance of a verbal offer of a position with us. YES/NO**

*This helps to speed up the recruitment process. A written offer will always be issued after the verbal offer.*

**Do you need a work permit to work in the uk? YES/NO if yes what is the expiry date................**

*Do you have any restrictions placed upon your work permit? YES/NO If yes please supply details:* **.......................................................................................................................................................................**

**As our Service Users are active and take part in various sports, eg. Swimming, Horse Riding, etc., do you have any phobias or fears which will not enable you to take part in their activities?**

*If so please explain your phobias or fears.*

**.......................................................................................................................................................................**

**Would you be willing to work more than 48 hours in a week if required? YES/NO**

**Do you have any special hobbies or interests?**

**.......................................................................................................................................................................**

**If you are successful, when would you be available to take up your post?.............................................**

**Finally, please use the space below to tell us what special attributes you have and tell us why you think you are suitable for this position.**

*Please pay special attention to this section as we think this is a most valuable area of any application. Feel free to use an additional sheet if required.*

**I agree that all information detailed within this application is accurate and true.**

**I understand that omissions or false statements may disqualify me from employment or lead to dismissal. I give the employer permission to contact all my referees given above.**

**PROCESSING OF PERSONAL DATA CONSENT FORM**

I accept that the Company holds personal data about me and I hereby consent to the processing by the Company or any associated company of my personal data for any purpose related to the performance of my contract of employment or my continuing employment or its termination or the conduct of the Company’s business, including, but not limited to, payroll, human resources and business continuity planning purposes.

I also explicitly consent to the Company or any associated company processing any sensitive personal data relating to me, for example sickness absence records, medical reports, particular health needs, details of criminal convictions and equal opportunities monitoring data, as necessary for the performance of my contract of employment or my continuing employment or its termination or the conduct of the Company’s business.

Finally, I consent to the Company providing my personal data to a third party where this is necessary for the performance of my contract of employment or my continuing employment or its termination or the conduct of the Company’s business, for example to a pension scheme provider in relation to my membership of a pension scheme or to an insurance company in relation to the provision of insured benefits.

**Signed:.......................................................................................... date:...........................................**

*If you have a current C.V. please attach it to this form and return it to us and we will be in contact with you as soon as we have decided our interview list.*

*Please include a passport photograph of yourself for our records.*

*At the end of the interview you will be invited to ask questions – please come prepared.*