



LILYROSE Confidential Job Application Form

If you require this form to be resent to you in large print or via tape recording so that you can fill it in more easily, please contact hr@lilyrosecares.co.uk. This will in no way be detrimental to your application.

Position Information

Date of Application	Employment Type		
Position	<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	<input type="checkbox"/> Contract
Availability [Enter Date]	Salary expectations	£	pa
Have you worked in a care support role before?	Yes	No	

Personal Information

First Name		Last Name	
Address			
Phone	Email	Date of Birth	
Mobile	Nationality		
Marital Status	<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Others

Educational Background

Degree / Course	University / Institute	Year of Graduation	Grade

Skills & Training

Skill & Training Achievement(s)	Level	Year	Institute

Attach your resume and portfolio to this job application form.
Send it via email to hr@lilyrosecares.co.uk.



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Employment History

Present/Last Employer		
Current/Previous Employment:	Start Date	End Date
Address		
Job title and brief description of duties		
Reason for leaving	Finishing Pay	£ <input type="text"/> pa

Other most recent Employer		
Previous Employment:	Start Date	End Date
Address		
Job title and brief description of duties		
Reason for leaving	Finishing Pay	£ <input type="text"/> pa

Other most recent Employer		
Previous Employment:	Start Date	End Date
Address		
Job title and brief description of duties		
Reason for leaving	Finishing Pay	£ <input type="text"/> pa

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General Information

Care workers work with vulnerable people and we take our responsibility to protect them very seriously. Therefore, we need you to answer the following questions truthfully and honestly:

Have you received any convictions, cautions, reprimands or final warnings that are not 'protected' as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013 by SI 210 1198)?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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To your knowledge, are you currently the subject of any criminal proceedings (for example, charged or summoned but not yet dealt with) or any police investigation?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If you answered 'yes' to either of the two previous questions, please provide details:

(Applicable to care homes in England after November 2021)

Have you been fully vaccinated against Covid-19?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If yes, can you show proof by presenting on request: your NHS Covid Pass/Pass letter? (If no you must obtain one)

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If not fully vaccinated, can you provide a medical exemption certificate? (If no, you must have one or be fully vaccinated in order to start work)

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Permission to Work in the UK (Optional)

Are there any restrictions to your residence in the UK that might affect your right to take up employment in the UK?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If you are successful in your application would you require permission to work in the UK?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Declaration

I, the job applicant named on the front of this form, confirm that the information I have given in this application is accurate and true to the best of my knowledge

Official Use Only

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