

  
**Starr Care**  
**Employment Application Form**

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**Locke House, 1 Woodham Lane, New Haw, Surrey KT15 3LZ**  
**Tel:01932 849888 Fax: 01932 849988**

**Personal Details**

Name: .....  
Address: .....  
.....  
..... Post Code:.....  
Telephone: .....  
Mobile: .....  
National Ins No: .....  
Nationality: .....  
Next of Kin: .....  
Relationship: .....  
Contact Details: .....

**References**

Please provide three referees from whom we can obtain references:

1 Name: .....  
Position: .....  
Address: .....  
.....  
Tel No: .....

2 Name: .....  
Position: .....  
Address: .....  
.....  
Tel No: .....

3 Name: .....  
Position: .....  
Address: .....  
.....  
Tel No: .....

**Health**

In order to protect staff and clients alike we would like you to complete the following questions.

- Are you in good health. YES  NO
- Do you a history of back problems. YES  NO
- Do you have diabetes. YES  NO
- Do you have epilepsy. YES  NO
- Do you have any hearing problems. YES  NO
- Do you have any visual problems. YES  NO
- Do you have a history of stress, anxiety or depression. YES  NO

Any questions that have been answered yes or any further information that you may wish to provide may be written below.

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**Training**

Do you have any previous training? Please list below any training that you have had, certificates will be required.

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**Rehabilitation of Offenders Act 1974**

It is a requirement of the law that we ask you if you have been convicted of an offence resulting a custodial sentence or a suspended sentence. Please answer yes or no, if yes details are required:

YES  NO

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**Client Protection**

In the course of your employment you will be in contact with the vulnerable people. It is the policy of Starr Care and a statutory requirement that enhanced police checks are carried out on all staff.

Please tick accordingly: I object  I do not object

**Additional Information**

Do you have a full U.K driving Licence? .....  
Do you have a current C.R.B? .....  
Do you have a car? .....

Marital Status: Married  Single  Other:.....

**Employment History**

Please list your full employment history. Please give dates in full.  
From To  
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**Declaration:**

I certify that the information that I have provided is truthful and accurate and I understand that penalties will be incurred for giving false information.

Signed: .....

Date: .....

**Process:**

Once this application form has been received we will contact you to arrange an interview. If we do not contact you please telephone the number above as we may not have received this form.

You will need to bring with you:

Two passport size photographs, your Driving License, passport, bank details, training certificates {if applicable} copy of insurance documents- this must include business use.

We look forward to hearing from you.