

Role Application

# **APPLICATION FORM**

Please complete the form with detailed information. All fields marked \* are mandatory

#### PERSONAL INFORMATION AND DETAILS

Title \*

Mr / Mrs / Miss / Ms

Surname \*

Forenames \*

House/Flat Number \*

Address Line \*

Post code \*

Email \*



National Insurance Number \*

Role you are applying for \*

#### **ADDITIONAL INFORMATION**

Do you own a valid UK driving license? \*  $\bigcirc$  Yes  $\bigcirc$  No

Do you own or have access to a car?  $\bigcirc$  Yes  $\bigcirc$  No

Do you have a Valid DBS? \* O Yes O No

Do you have the legal Right to Work in the UK? \*  $\bigcirc$  Yes  $\bigcirc$  No

If 'Yes', Please specify Work Permit Type \*

Are you related to, or referred by anyone who works for zazaCARE? \*  $\bigcirc$  Yes  $\bigcirc$  No

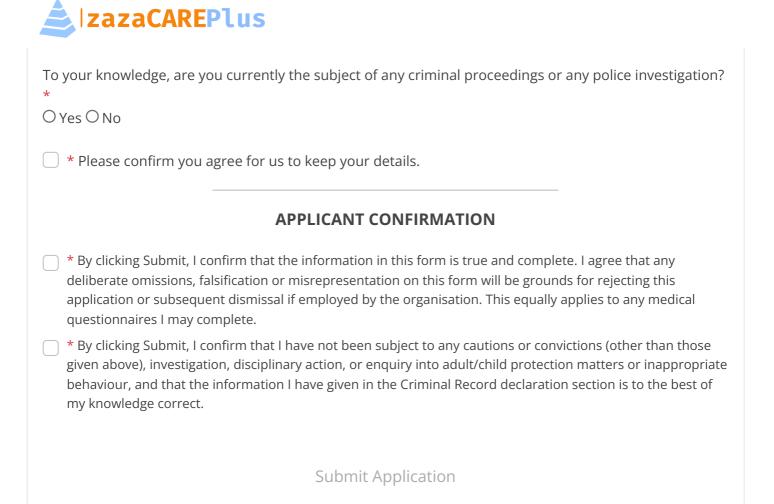
If 'Yes', Please specify their names

### **CRIMINAL RECORD DECLARATION**

The nature of work you are applying for is exempt from the provisions of the Rehabilitation of Offenders Act 1974. Because you are applying for a post involving access to a person in receipt of care services, your offer of employment will be subject to a satisfactory enhanced Disclosure and Barring check. It is therefore a requirement that all previous convictions are declared, even those which would otherwise be regarded as 'spent'. (Any such information will be treated confidentially).

Please answer the following questions after reading the above carefully.

Have you ever been convicted of a criminal offence? \*  $\bigcirc$  Yes  $\bigcirc$  No



## ZazaCARE Plus Ltd

...Passionate In Services Delivery You Can Trust!

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