Job Application Form

Hexagon Care is committed to the safeguarding and promotion of the welfare of all children and young people, their families, and our staff, volunteers and carers. Everything we do promotes the safety and wellbeing of the children and young people we work with.

Some of the fields on the application form are mandatory, indicated by a \*. Failure to complete all mandatory fields will result in your application not being considered.

Job details

|  |  |
| --- | --- |
| Position Applied For \* |  |
| Working arrangements advertised | Full-time ☐ / part-time ☐ / job share ☐ |
| Name of Home & Location |  |
| How did you hear about this vacancy \*  Please state e.g. Indeed, Facebook etc. If referred by a Hexagon employee please provide their name. \* |  |
| Do you have any affiliation to any existing Hexagon Care Services staff? (e.g Relative/Partner/Friend) - If YES provide details \* |  |
| What is your DBS certificate number? (If registered on the DBS update service)  Certificate number usually starts with 0015, 0016, or 0017.  By providing this number you give Hexagon Care Services consent to run an up to date check on the DBS you have provided. |  |

# Personal details

|  |  |  |  |
| --- | --- | --- | --- |
| Surname \* |  | Forename(s) \* |  |
| Previous surname(s) |  | Previous forename(s) |  |
| Title \* |  | Preferred name |  |
| Home Telephone \* |  | Mobile\* |  |
| Email address \* |  | | |
| Address \*  (incl postcode) |  | | |

Driving Licence

|  |  |
| --- | --- |
| Do you hold a full current Driving Licence? \*  (select as applicable) | Yes ☐ / No ☐ |
| Do you have any current endorsements? \*  (select as applicable) | Yes ☐ / No ☐ |
| If YES, please provide details: \* |  |

# Present employment

|  |  |
| --- | --- |
| Job Title \* |  |
| Name of Employer\* |  |
| Address of Employer \* |  |
| Date commenced with employer \* |  |
| Notice required \* |  |
| Current Salary \*: |  |
| Reason for Leaving \*: |  |
| Does this role involve working with children or young people or vulnerable adults? \* |  |
| Briefly describe your present job; its main purpose and your responsibilities: \* | |

# Previous employment

Include permanent, temporary and voluntary work since leaving school (continue on a separate sheet if necessary). Please list most recent first.

|  |  |
| --- | --- |
| Job Title \* |  |
| Name of Employer\* |  |
| Address of Employer \* |  |
| From / To (Exact Dates) |  |
| Current Salary \*: |  |
| Reason for Leaving \*: |  |
| Does this role involve working with children or young people or vulnerable adults \*? |  |
| If Yes, please state email address\*  Business email only |  |

|  |  |
| --- | --- |
| Job Title \* |  |
| Name of Employer\* |  |
| Address of Employer \* |  |
| From / To (Exact Dates) |  |
| Current Salary \*: |  |
| Reason for Leaving \*: |  |
| Does this role involve working with children,young people or vulnerable adults\*? |  |
| If Yes, please state email address\*  Business email only |  |

|  |  |
| --- | --- |
| Job Title \* |  |
| Name of Employer\* |  |
| Address of Employer \* |  |
| From / To (Exact Dates) |  |
| Current Salary \*: |  |
| Reason for Leaving \*: |  |
| Does this role involve working with children, young people or vulnerable adults \*? |  |
| If Yes, please state email address\*  Business email only |  |

|  |  |
| --- | --- |
| Job Title \* |  |
| Name of Employer\* |  |
| Address of Employer \* |  |
| From / To (Exact Dates) |  |
| Current Salary \*: |  |
| Reason for Leaving \*: |  |
| Does this role involve working with children, young people or vulnerable adults\*? |  |
| If Yes, please state email address\*  Business email only |  |

**Continue on separate sheet if necessary**

Time Breaks in Employment

|  |  |  |
| --- | --- | --- |
| Reasons should be given for any period in which you were not in either employment, education or training since leaving school. Please state this information in chronological order. Please continue on a separate sheet if necessary. | | |
| From (exact dates) \* | To (exact dates) \* | Reason for break \* |
|  |  |  |
|  |  |  |
|  |  |  |

# Living or working overseas

|  |  |  |  |
| --- | --- | --- | --- |
| Have you ever lived or worked abroad? | | Yes ☐ / No ☐ | |
| *If you have answered YES please complete the below. An overseas police check or letter of good conduct may be required* | | | |
| Country | Date of entering country (MM/YY) | Date returning to UK (MM/YY) | Nature of visit (E.g Work, Sabattical etc) |
|  |  |  |  |

# Education and Qualifications

|  |  |  |
| --- | --- | --- |
| Please provide details of qualifications gained since age 11. | | |
| Name of School, College, University etc \* | Dates attended (From / To) \* | Qualifications awarded  (incl. grades) \* |
|  |  |  |
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|  |  |  |

# Training

|  |  |  |
| --- | --- | --- |
| Please list all training undertaken that is relevant to the post applied for. Continue on a separate sheet if necessary. | | |
| Course Title | Dates attended (From / To) | Training provider |
|  |  |  |
|  |  |  |
|  |  |  |
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|  |  |  |
|  |  |  |

Ofsted History

|  |  |  |  |
| --- | --- | --- | --- |
| For Home or Deputy Manager positions only. Please continue on a separate sheet if necessary. | | | |
| Establishment(s) | Date of Inspection(s) | Outcome(s) | SC number/URN(s) |
|  |  |  |  |

# Why are you applying for this job?

Please state below how you meet the person specficiation for the role. Please continue on a separate sheet if necessary

|  |
| --- |
|  |

# References

# One of the referees must be your current (or most recent) employer. If you have no previous employment history, please provide a tutor or personal referee who can provide a character reference.

**For care related positions, we require email addresses of all previous employers that involve working with children, young people or vunerable adults.**

NB:We reserve the right to seek references from any previous employers listed in the ‘Previous Employment’ section of this form.

|  |  |  |
| --- | --- | --- |
| Current Employer | | |
| Name \* |  | |
| Address \* |  | |
| Tel No \* |  | |
| Occupation \* |  | |
| Email Address \*  (business address only) |  | |
| May we contact this referee prior to interview? (select as applicable) | | Yes ☐ / No ☐ |
| Second Employer | | |
| Name \* |  | |
| Address \* |  | |
| Tel No \* |  | |
| Occupation \* |  | |
| Email Address \*  (business address only) |  | |
| May we contact this referee prior to interview? (select as applicable) | | Yes ☐ / No ☐ |
| Personal Referee or course tutor (if applicable) | | |
| Name \* |  | |
| Address \* |  | |
| Tel No \* |  | |
| Occupation \* |  | |
| Email Address \* |  | |
| May we contact this referee prior to interview? (select as applicable) | | Yes ☐ / No ☐ |

# Warnings and Disciplinary Issues

|  |  |
| --- | --- |
| Have you ever been the subject of a Disciplinary Investigation relating to the safeguarding of children or adults in your care? \*  *If yes, please provide further information in the text box provided below* | Yes ☐ / No ☐ |
|  | |
| Have you ever been subject to a Capability or Disciplinary Investigation for another reason? \*  *If yes, please provide further information in the text box provided below* | Yes ☐ / No ☐ |
|  | |
| Have you ever received a Formal Capability or Disciplinary Warning or Sanction? \*  *If yes, please provide further information in the text box provided* *below* | Yes ☐ / No ☐ |
|  | |
| Are there any alleged offences outstanding against you? \*  *If yes, please provide further information in the text box provided below* | Yes ☐ / No ☐ |
|  | |
| The Disqualification from Caring for Children Regulations (2002) prevent an individual from being employed in residential care/children’s home if they meet certain criteria that may make them unsuitable to work with these vulnerable groups. There criteria include: (this is not an exhaustive list) Certain serous criminal offences; Court orders relating to the care of your own child; Being prohibited from private fostering.  Do you have any reason to believe you are disqualified from caring for children? \*  *If yes, please provide further information in the text box provided below* | Yes ☐ / No ☐ |
|  | |

# Rehabilitation of Offenders Act 1974

The nature of the post for which you are applying means that it is exempt from Section 4(2) of the Rehabilitation of Offenders Act 1974. You are not, therefore, entitled to withhold information about cautions or convictions, which for other purposes are ‘spent’ under the provisions of the Act, unless covered by the Disclosure and Barring Service filtering rules which specify under what circumstances certain cautions or convictions are classed as ‘spent’.

Further information can be found at: <https://www.gov.uk/government/publications/filtering-rules-for-criminal-record-check-certificates>

New legislative changes came into effect from 28th October 2023. If you are unsure whether you need to disclose your caution or conviction you can check this on the .gov website here: <https://check-when-to-disclose-caution-conviction.service.gov.uk/steps/check/kind>

Filtering rules do not apply to certain convictions, please refer to: <https://www.gov.uk/government/publications/dbs-list-of-offences-that-will-never-be-filtered-from-a-criminal-record-check>

If you are successful the information on the form will be considered and, if you have declared any previous criminal convictions, cautions or reprimands, these may be discussed with you prior to a decision being taken on your appointment. If you are appointed any failure to disclose cautions or convictions not expressly covered by the filtering rules may result in the offer of appointment being withdrawn or disciplinary action being taken and possibly the police and/or the Disclosure and Barring Service being notified.

Please be aware that Hexagon Care Services operates a policy on the recruitment of ex-offenders and that a criminal record will not automatically debar anyone from employment with the organisation.

|  |  |
| --- | --- |
| Do you have any unspent conditional cautions or convictions under the Rehabilitation of Offenders Act 1974? \*  *If yes, please provide further information in the text box provided below* | Yes ☐ / No ☐ |
|  | |
| Do you have any adult cautions (simple or conditional) or spent convictions that are not protected as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2020?” \*  *If yes, please provide further information in the text box provided below* | Yes ☐ / No ☐ |
|  | |

# Immigration, Asylum and Nationality Act 2006

|  |  |
| --- | --- |
| Do you have the right to take up employment in the UK, either as a UK National, or because you hold a valid work permit? \* | Yes ☐ / No ☐ |

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# Declaration

|  |  |  |  |
| --- | --- | --- | --- |
| I declare that the information given on this application form is true and correct. I understand that any false or misleading information, or omissions of information concerning criminal convictions etc may disqualify my application or may render my Contract of Employment, if I am appointed, liable to termination. Should my application be successful, I give my consent for Hexagon Care to seek employment references from any of the previous employers listed in the ‘Previous Employment’ section of this form. | | | |
| Signed: \* |  | | |
| Date: \* |  | | |
| Print name: \* |  | | |
| If form has been completed electronicallyplease place an ‘x’ in this box to indicate your consentà | | **☐** | |
| DPA logo  The General Data Protection Regulation (GDPR)  As part of any recruitment process, the organisation collects and processes personal data relating to job applicants. The organisation is committed to being transparent about how it collects and uses that data and to meeting its data protection obligations. Hexagon Care will only process the information you have provided in this form for the purpose of recruitment and selection and, if you are successful in securing this position, for purposes relating to your employment. Completed application forms and supplementary information provided by you in support of your application will be retained by the HR Department in a secure place for a period of 6 months, after which time the information will be destroyed, excepting for persons who subsequently take up employment with the organisation. This is to enable the organisation to fulfil its legal obligations in the event of a legal claim being brought against the organisation in relation to the recruitment and selection process. To view our Job Applicant Privacy Notice in full, please go to <https://www.hexagoncare.com/wp-content/uploads/2018/05/DRAFT-Job-Applicant-Privacy-Notice-GDPR-Compliant.pdf> | | | |
| Should you be unsuccessful in your application for the position applied for but would like us to send you information about future vacancies, please place an ‘x’ in the box to indicate your consentà. You can withdraw your consent at any time by contacting a member of the HR Department by phone on 0333 600 6600, by email at [hr@hexagoncare.com](mailto:hr@hexagoncare.com) or in writing using the address below. | | | **☐** |

Reasonable adjustments

If you require any reasonable adjustments to the recruitment process, including completion of this application form and interview, please provide details on a separate sheet of paper**.** Alternatively, please contact a member of the HR Department on 0333 600 6600 to discuss further.

# How to return your form

Please email your completed application formto[recruitment](mailto:recruitment)@hexagoncare.com

Alternatively, completed forms can be sent to Hexagon Care Services, HR Dept, Unit 1 Tustin Court, Riversway, Preston, PR2 2YQ

Thank you for your application