

Please attach
3 passport
photographs,
writing your
name on the back

EDINBURGH OFFICE
Second Floor Suite
63/65 Shandwick Place
Edinburgh EH2 4SD
Tel: 0131 229 2345
Fax: 0131 229 3456

GLASGOW OFFICE
69 Dixon Road
Crosshill, Glasgow
G42 8AT
Tel: 0141 422 1313
Fax: 0141 636 3904



SPS Social Care Ltd
Email: edinburgh@spssocialcare.co.uk
Web: www.spssocialcare.co.uk

APPLICATION FORM

Please print carefully in black ink and return your completed form to address above

Position applied for: _____

PERSONAL INFORMATION

Title:	Forename:	Surname:
Maiden Name (if applicable):	Mobile No:	
Home Address:	Home No:	
	Email Address:	
	Nationality:	
Are you registered disabled: YES <input type="checkbox"/> NO <input type="checkbox"/>	NI No:	
If yes please supply full details:		

TRAINING / QUALIFICATIONS

Please supply full details of your educational background:

College/Training Facility	Date	Course	Qualification Gained	Comments

GENERAL DETAILS

Are you an EU National: YES <input type="checkbox"/> NO <input type="checkbox"/>	If not, do you require a work permit: YES <input type="checkbox"/> NO <input type="checkbox"/>	
Current driving licence: YES <input type="checkbox"/> NO <input type="checkbox"/>	Insurance for business use: YES <input type="checkbox"/> NO <input type="checkbox"/>	Car owner: YES <input type="checkbox"/> NO <input type="checkbox"/>

WORKING TIME DISCLAIMER

I hereby agree to opt-out of the 48 hour working week limitation, as laid down in the working time regulations 1998. I understand that I may end this agreement by giving one week's notice in writing to SPS Ltd.

Signed: Date:.....

REFERENCES

Please name two employment referees, who between them cover at least the last three year period. If you have been unemployed, but in education, the names of your tutor and a referee from your last employer are needed. If necessary, voluntary work can be defined as employment for this purpose.

	Reference 1	Reference 2
Name of referee		
Job title		
Name of company		
Email:		
Telephone No:		
Address (including post code)		
May we contact this referee prior to your interview.	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
How long have you known this person?		

REHABILITATION OF OFFENDERS ACT 1974

By virtue of the Rehabilitation of Offenders Act 1974 (Exemptions) (Amendments) Order 1986, the provision of section 4.2 of the Rehabilitation of Offenders Act 1974 do not apply to employment which is concerned with the provision of health services and which is of such a kind as to enable the holder to have access to persons in receipt of such services in the course of his / her normal duties. Your answers to the following questions should include any 'spent' convictions. This may or may not affect your application.

Have you ever been convicted of a criminal offence YES NO

If yes please give details below:

