

Paramount Care Aberdeen Suite 4 Westhill Shopping Centre Westhill AB32 6RL Tel: 01224 279400

Personal Details

| Mr/Mrs/Miss/Ms | | | | | | | |
|------------------------|-------------|------|----|---|--|--|--|
| Surname | | | | First Name(s) | | | |
| Date of Birth | | | | Email Address | | | |
| Current Address | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Home Tel No. | | | | Driving License: Yes No Full/Provisional/UK/International | | | |
| | | | | Use of Car Yes No Business Insurance Yes No | | | |
| Mobile Tel no: | | | | Other e.g bicycle* *Please state | | | |
| Education and Training | | | | | | | |
| School/College/Univ | versity etc | From | То | Qualifications gained and courses | | | |
| | | | | | | | |

Work History

Most recent first.

| Employer | From | То | Position held and duties | Reason for Leaving | | | |
|--|-----------------------------|------------------|--------------------------|--------------------|--|--|--|
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| | onsider you uffer from a | Yes No Yes No | | | | | |
| Do you require any particular arrangements for interview Yes | | | | No | | | |
| (if you have answered yes to any of the above please give details) | | | | | | | |
| | | | | | | | |
| Are you a Citizen of the EU or EEA? Yes No | | | | | | | |
| (see accompanying guidance for explanation) | | | | | | | |
| If 'No', do you have a valid Work permit? | | | | | | | |

Character or work references, one of which must be current or most recent employer,

Your referees may be contacted at this stage unless you indicate your objection by ticking the box(es) below. However, satisfactory references will be required prior to start of employment

| 1.) Name: | 2.) Name: | |
|----------------------|----------------------|--|
| Address: | Address: | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Telephone number | Telephone number | |
| Occupation | Occupation | |
| Relationship to you* | Relationship to you* | |

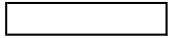
Employer/ Academical/ Professional Body

Employer/ Academical/ Professional Body

Declaration

I confirm, to the best of my knowledge that the information given here is correct. I understand that any false information given may be cause for termination of employment.

Signed



*Circle as appropriate