

Thank you for applying to work for Rocialle Healthcare Limited.

To give yourself the best chance of success with your application, it's important that you provide us with a detailed understanding of your career history and your skill set. Please take your time to complete this application form fully. You may ask a member of the HR Team for assistance if you have any queries.

Personal Details		
Last Name	First Names(s):	
Address:		
Postcode:	<i></i> .	
		(Mob)
Email address:		
Position Applied For		
Name of role you are applying for:		
Current Notice Period -		
Current Wage/Salary -	£:	per week/month
Are you able to work -	Full Time Part Time	e (please indicate)
Please specify the hours you are ab	le to work:	(as stated in advertisement)
Please specify which days you are a	able to work:	
Monday Tuesday Wednesday Thu	rsday Friday Saturday S	unday
Have you worked for Rocialle Health	ncare Limited before? If ye	s, please advise of which job(s) and when:
If you are applying for a job that inv	olves driving or using a fo	rklift truck, please specify your experience:
Car/Van driving only HGV/LGV Clas	sification, e.g., Class 1	
Forklift Truck – Reach truck/Counterba	alance	
Do you have a driving licence that peri	mits you to drive in the UK?	Yes / No
Country of issue		
Do you have a Fork Lift Truck certifica	te? Yes / No	
Do you have any driving endorsement	s? Yes / No	
If yes, please give details:		

Please bring your licence and/or copies of your FLT certificates and a photocard with you to your interview.



Recruitment Policy & Equal Opportunities

It is our policy to employ the best qualified personnel and provide equal opportunity for advancement, including promotion and training. We will never discriminate against any individual because of their race, religion or religious belief, colour, age, political belief, national origin, gender, sexual orientation, or marital status.

Your Experience

Please tick the areas of work you have had experience in. These will be discussed in more depth at your interview.

Working on a production line	Machine operation	Being responsible for others
Stores/Stock Checking	Order / Packing	Ability to learn new jobs
Forklift driving	Completing paperwork	Health and Safety
Counting	Moving heavy loads	Using computers
Quality checking	Administrative tasks	

Your Education

Subject	Qualification	Date Received

Your Key Skills

Please list below any skills that may be relevant to your application:



Disabilities

Please describe any reasonable adjustments you feel would need to be made, either during the Recruitment process/your application, or to enable you to carry out your role:

Employment History

Dates Employed (From / To)	Name & Address of Employer	Your Job Title & Main Duties	Reason for Leaving

Convictions

Do you have any convictions or conditional cautions which are currently unspent under the Rehabilitation of Offenders Act 1974 (You do not need to disclose anything that is 'spent'. If you are unsure, please advise a member of the HR Team).

Work Permits



If yes, please bring your permit with you to your interview.

<u>References</u>

We will require two references. Normally these should be your current/most recent employer and one other employer. In some cases, a personal reference is sufficient. Please include the correct postcode for each referee.

Full Name - Referee A	Full Postal Address & Company Name	Telephone Number
Job Title		Email Address
Full Name - Referee B	Full Postal Address & Company Name	Telephone Number
Job Title		Email Address

Declaration

Thank you for completing this form - we wish you the best of luck with your application. Before signing this form, please be sure to carefully re-read your answers, and check that you have completed <u>all</u> sections. Your signature will be taken as acknowledgement that all the information you have provided is complete, correct, and true, and that any offer of employment is subject to your permission for us to approach your referees to obtain references. Please be aware that any false or misleading statement may be sufficient cause for rejection or, if employed, termination of your contract.

Print Name	
Signature	
Dato	