

Thank you for your interest in St Leonard's Hospice and the Post.

Further information regarding the Hospice and its services can be found on our website: [www.stleonardshospice.org.uk](http://www.stleonardshospice.org.uk)

PLEASE TAKE A FEW MINUTES TO READ THIS GUIDANCE BEFORE COMPLETING YOUR APPLICATION FORM.

*The Hospice can be a challenging environment to work in. The primary and paramount concern of the Hospice is the care, welfare and safety of patients, service users, staff, volunteers and others who come into contact with our organisation.*

### **Guidance on completing your application form**

1. Please make time to read the details that came with this form including the Job Profile, Person Specification and Job Details.
2. Your application form and accompanying details (if applicable) are the only basis we use for selection. It is important your application is as comprehensive as possible. This is your opportunity to 'promote yourself' to the selection panel. Please take time to complete the form. The information you supply will be measured against the Person Specification.
3. It is really important you tell us WHY you want the post and what you can offer.
4. Application forms must be handwritten and dark ink used. Additional information (if supplied) may be word-processed or handwritten on white paper. Other forms of submission will be accepted but please contact us first.
5. You must complete ALL sections of the application form and ensure it is signed. Incomplete applications will not be accepted.
6. Faxed or emailed applications will not be accepted.
7. Curriculum Vitae's (CV's) may be included with your completed application form, but not instead of.
8. Please feel free to add supporting information either word-processed or handwritten. It is advisable not to add more than three sheets of A4 paper.
9. Ensure there are no gaps in your employment history. If there are gaps, tell us about them, ie, unemployment, college, gap year, maternity leave, etc.

10. Don't just tell us about your work or employment; tell us about your social, leisure pursuits and hobbies.
11. If you are applying for more than one post you must submit an application form for each post you are applying for.
12. There is usually an opportunity with each post to speak with a named person or visit the Hospice informally before you submit an application. This is also possible if you are short-listed.
13. If you have any difficulties completing the application form don't hesitate to contact the Human Resources/Administration Department and ask for assistance.
14. Once you are happy the application form has been completed in full, signed and any additional information is completed you should return your application either by post or hand deliver it to the Hospice Reception. The Hospice will not be responsible for applications posted but not received.
15. Application details should be received at the latest by 9.00am or 1<sup>st</sup> post on the closing date and will not usually be accepted after this time or date.
16. Envelopes should be marked '**Confidential**' and addressed to:  
  
Human Resources  
(Applications)  
St Leonard's Hospice  
185 Tadcaster Road  
YORK  
YO24 1GL

#### Selection Process

1. All applicants will be informed in writing of the outcome of their application, usually within four weeks of the closing date.
2. Candidates called for interview will receive a letter outlining the date, time and location of interview, the names of the interview panel and details of the interview format.
3. It is usual procedure for three people to form the interview panel. One is usually a Senior Manager or Trustee; one is usually the Department Head of the appointing department and the final one is a member of staff or external adviser.

### Hospice Appointment Policy

It is the policy of the Hospice that all staff appointments are made subject to the following conditions:

1. A minimum of two written references are received that meet the standard required by the Chief Executive or Appointing Officer (one reference **MUST** be from a current employer or if not in current employment your last/most recent employer). For students, the Headteacher, Principal or Dean of the School, College or University is appropriate.
2. References WILL BE REQUESTED PRIOR TO INTERVIEW FOR ALL APPOINTMENTS unless there is a specific reason why this is not possible and this should be fully explained in your application or in a separate letter.
3. Applicants must obtain the permission of a referee before using them.
4. A refusal by a referee to provide a written reference will not necessarily prevent an applicant from being appointed.
5. Candidates will be required to produce evidence of nationality at interview. You are advised to bring your passport with you.
6. The satisfactory completion of a medical questionnaire and subsequent follow up by the Occupational Health Department if required.
7. For some posts, original evidence of qualification level, certificates, diplomas, degrees, pin numbers and professional membership will be verified. Original documentation will need to be produced and copied. Professional Associations and Colleges will be contacted.
8. Previous employers and/or education establishments may be contacted and employment histories will be checked.
9. For some posts, evidence of publications, research or papers may be requested and verified.
10. ALL applicants aged 18 years or over who are offered employment (paid or voluntary) will be subject to a criminal records check at an enhanced level from the Criminal Records Bureau before an appointment is confirmed.
11. Criminal records will be taken into account for recruitment purposes, only when the conviction is relevant and will not necessarily be a bar to obtaining a position. Successful candidates will be required to complete a confidential declaration detailing any criminal convictions, cautions, reprimands, final warnings and any other information that may have a bearing on their suitability for the post.

12. In the case of 'joint appointments' eg, with the NHS Primary Care Trust, NHS Hospital Trust or Local Authority Social Services Department, other criteria may be added.
13. There is a six-month probationary period for all posts.
14. Any information or details provided, which are found to be false, inaccurate or incorrect may lead to the withdrawal of an offer of employment, disciplinary procedures or the summary dismissal from employment.
15. Following the offer of appointment the following documentation must be presented and may be asked for again connected with the CRB check or pension scheme.
  - \* Passport
  - \* Birth Certificate
  - \* National Insurance Number (Card or Tax Notice)
  - \* Driving Licence (if held)
  - \* Evidence of Home Address (Bank Statement, Credit Card Bill, Utility Bill, Council Tax Book)
16. The adjudicating officer will be the Chief Executive or, with his/her authority a duly appointed deputy, which will include but not exclusively be the following posts: Director of Clinical Services, Director of Fundraising or Medical Director. Their decision will be final.
17. If you have any questions or wish to discuss anything contained in the appointments policy you should contact the Appointing Senior Manager.

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*St Leonard's Hospice is striving to be an Equal Opportunities Employer.  
 We operate a 'No Smoking' Policy within all Hospice premise & grounds and vehicles.*

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St Leonard's Hospice  
 185 Tadcaster Road  
 YORK  
 YO24 1GL

St Leonard's Hospice Fundraising  
 Centre  
 185 Tadcaster Road  
 YORK, YO24 1GL

Tel: 01904 708553  
 Fax: 01904 704337

Tel: 01904 777777  
 Fax: 01904 777775

Email: [enquiries@stleonardshospice.org.uk](mailto:enquiries@stleonardshospice.org.uk) Email: [SLHFRC@MSN.com](mailto:SLHFRC@MSN.com)

Registered Charity No: 509294 Company Limited by Guarantee Registration No: 11451533  
 Registered Office: 185 Tadcaster Road, York, YO24 1GL



**APPLICATION FORM - Confidential**

<b>Post applied for:</b>		<b>Post Reference:</b>
Surname:	Forenames:	Title: (Ms,Mrs,Miss,Mr,Other)
Previous Surnames:	Any Other Names Known By:	National Insurance Number:
Date of Birth:	Telephone/Contact Details:	
Place of Birth:	Daytime:	Evening:
	Mobile:	Email:
Permanent address:		Present address (if different):
Post Code:		Post Code:
<b>PRESENT POST</b>		
Job title:		Name and address of employer:
Present salary & grade:		
Date appointed:		Post code:
Notice required:		Telephone no:
Reason for leaving present post:		
<b>PREVIOUS EMPLOYMENT &amp; GAPS IN EMPLOYMENT (most recent first)</b>		
<b>Job Title</b>	<b>Name &amp; Address of Employer</b>	<b>Dates of Appointment, Salary Level and Reason for Leaving/Gap</b>
How did you find out about this vacancy?:		

<b>EDUCATION</b>			
School/Sixth Form/College	From	To	Details of qualifications gained
<b>FURTHER/HIGHER EDUCATION/PROFESSIONAL TRAINING</b>			
College/University/Organisation	From	To	Details of qualifications gained
<b>ANY OTHER COURSES/TRAINING</b>			
Course Title	Course Provider		Dates
<b>PROFESSIONAL REGISTRATION</b>			
<p>Applicants for medical, professional and nursing posts <b>must</b> state:</p> <p>Professional Registration Body (eg NMC, GMC, GSCC): _____</p> <p>Type of Registration (eg Full, Limited, Provisional): _____</p> <p>Registration Number: _____</p> <p>Expiry Date: _____</p>			

**FURTHER INFORMATION**

This is one of the most important parts of your application. Tell us why you are applying for the post and how your experience, skills, responsibilities and knowledge will enable you to do the job. Remember to match this to the Person Specification. (Add additional sheets if required)

**LEISURE PURSUITS/INTERESTS**

Give details of your spare time pursuits and interests:

Do you have a clean, full and current driving licence?

**Yes / No\***

If **NO** to the above, please give details

Do you own or have regular use of a vehicle?

**Yes / No\***

\* only answer these questions if driving and the use of a vehicle is a requirement of the post.

Are you subject to UK Immigration Control?

**Yes / No**

If **YES** to the above, please give details

Do you require a work permit?

**Yes / No**

Nationality

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**Referees**

Please give the names and addresses of two persons who would be prepared to give a reference on your behalf. One should be your present or most recent employer. Neither should be a relative.

Name:	Name:
Job title/capacity known:	Job title/capacity known:
Company:	Company:
Address:	Address:
Post code:	Post code:
Telephone no.:	Telephone no.:

**HEALTH**

**Disabilities or health problems do not preclude full consideration for the job, and applications from suitable disabled persons are welcome. All information provided by candidates will be treated as confidential.**

Are you generally in good health? Yes / No

Please state the number of days you reported sick during the past twelve months.

\_\_\_\_\_

Would you be willing to undergo a medical examination by a registered practitioner or occupational health department, if required to do so? Yes / No

Are you disabled? (If 'Yes', please give details) Yes / No

Are you registered as disabled? Yes / No

Registered Disabled No: .....

**REHABILITATION OF OFFENDERS ACT 1974**

**St. Leonard's Hospice aims to promote equality of opportunity for all with the right mix of talent, skills and potential.** Criminal records will be taken into account for recruitment purposes only when the conviction is relevant, and will not necessarily be a bar to obtaining a position. Successful candidates will be required to complete a confidential declaration detailing any criminal convictions, cautions, reprimands and final warnings and any other information that may have a bearing on their suitability for the post.

As St. Leonard's Hospice meets the requirements in respect of exempted questions under the Rehabilitation of Offenders Act 1974, all applicants aged 18 years or over who are offered employment will be subject to a criminal record check at the enhanced level from the Criminal Records Bureau before the appointment is confirmed. This will include details of cautions, reprimands or final warnings, as well as convictions. We comply fully with the Criminal Record Bureau Code of Practice, which is available on request. The Hospice will also request checks and make referrals under the Protection of Vulnerable Adults (POVA) and Protection of Children Schemes.

**DECLARATION**

I confirm the information I have given on this form and others connected with my application is to the best of my knowledge and belief, correct, complete and true. I understand that my application may be rejected or if I have been appointed that I may be dismissed for withholding relevant details or giving false information.

**Signature of Applicant:**..... **Date:**.....





**DECLARATION OF CRIMINAL RECORD**

Name:	Post:
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As stated on the application form, because of the sensitive nature of the duties the post holder will be expected to undertake, you are required to disclose details of any criminal record. Only relevant convictions and other information will be taken into account, so disclosure need not necessarily be a bar to obtaining this position.

If you have declared a criminal record and we believe this to have a bearing on the requirements of the post, we will discuss the matter with you at the interview. If we do not raise the record with you, it is because we have taken the view that it should not be taken into account in deciding your suitability for the post. If you require further information, or have any concerns about filling in this declaration, please contact the Human Resources/Administration Department on 01904 708553.

1. Have you ever been convicted by the courts or cautioned, reprimanded or given a final warning by the police? (Note that the post you have applied for is exempted from the *Rehabilitation of Offenders Act 1974*, which means that all convictions, cautions, reprimands and final warnings on your criminal record need to be disclosed).

YES 
   
 NO

If YES, please give details below.

Date	Offence	Penalty

2. Are you aware of any police or other enquiries, undertaken or current, following allegations made against you, which may have a bearing on your suitability for this post?

YES 
   
 NO

If YES, please give details below.

Date	Enquiry/Allegation and Full Details

Signed: ..... Date: .....

Print Full Name: .....