

Application Form

Application for employment as Patient Co-ordinator

Please complete this form and submit with a copy of your CV, which must include employment history by month and not year. You are also required to provide two references and to complete the self-declaration form which is also available on our website www.windrushmedicalpractice.co.uk

SURNAME:
FIRST NAME:
OTHER NAMES:
ADDRESS:
HOME TEL NO:
MOBILE TEL NO:
EMAIL:

Please enter below details of education and training

EDUCATION	TRAINING

Please provide details of your **current** employment

NAME OF EMPLOYER:	
ADDRESS:	
JOB TITLE:	
DUTIES:	
RATE OF PAY:	
DATE EMPLOYED FROM:	TO:
REASON FOR LEAVING:	

Please provide information on your **previous** employment history by **MONTH**

NAME OF EMPLOYER:	
ADDRESS:	
JOB TITLE:	
DUTIES:	
RATE OF PAY:	
DATE EMPLOYED FROM:	TO:
REASON FOR LEAVING:	

Previous employer (2)

NAME OF EMPLOYER:	
ADDRESS:	
JOB TITLE:	
DUTIES:	
RATE OF PAY:	
DATE EMPLOYED FROM:	TO:
REASON FOR LEAVING:	

Previous employer (3)

NAME OF EMPLOYER:	
ADDRESS:	
JOB TITLE:	
DUTIES:	
RATE OF PAY:	
DATE EMPLOYED FROM:	TO:
REASON FOR LEAVING:	

Should you need further space, please provide this on a separate piece of paper

Please tell us why you have applied for this post, about other jobs you have done and about the skills you have used or learned in those posts.

Can you be flexible in your hours if business needs require?

YES

NO

Please tell us what is your perception of Patient Confidentiality?

Please tell us where you found the advert for this position?

If you have a disability please tell us about any adjustments we may need to make in order to assist you at interview

What is your availability for interview?

When would you be able to start?

Have you ever been convicted of a criminal offence?

YES

NO

Would you be willing to participate in a telephone interview?

YES

NO

Should you not have enough space to provide all your information please present this on a separate piece of paper.

Please provide details for two employer references

No approach will be made to your present employer before an offer of employment is made to you.

Reference 1	Reference 2

I can confirm that to the best of my knowledge the above information is correct. I accept that providing deliberately false information could result in my dismissal.

Name:

(Please enter in capitals)

Signature:

Date: