APPLICATION FORM

<u>Please note: to be on the PA Register you will need to sign up to the attached Code of Conduct</u>

The Code of Conduct outlines a set of minimum standards that you will agree to meet when delivering your services. You will need to sign the Code of Conduct as part of the approval process.

Data Protection

The following information will be displayed on our website/given to the public on request:

- Your contact telephone number(s), email address and the area of the city in which you are located
- Your availability and hours of work (including where you want to work and if you are a car driver)
- Your charges and employment status (as appropriate)
- Any other information you provide regarding the service you wish to provide

SECTION 1: PERSONAL DETAILS

Full name:	Mr		Mrs		Ms		Miss	
Date of birth:								
Address:	Postcode:							
Daytime contact number:	Mobile number:							
Gender:								
Email address:								
UK National Insurance number:				•	•		•	

SECTION 2: QUALIFICATIONS

Please also indicate subjects currently being studied. All qualifications disclosed will be subject to a satisfactory check.

Subject/Qualification	Place of study	Grade/Result	Year obtained





SECTION 3: RELEVANT COURSES ATTENDED

Please note that you will have to undertake a basic induction course through E-Learning. Any further training once completed satisfactorily can be shown in your entry on the Personal Assistant Register.

Please list below any training that you have already completed relevant to your role as a Personal Assistant:

Course Title	Training provider	Duration	Year completed

SECTION 4: EMPLOYMENT HISTORY

Are you eligible to work in the UK?	Yes
Are you eligible to work in the Or:	169

Please record below the details of your employment history beginning with your **current or most recent first**. If required, please provide additional information regarding your employment history within the 'Additional Information/Achievements' section.

No

Current/most recent employer	
Employer name	
Employer address	
Type of business	
Reporting to (Job title)	
Telephone	
Your job title	
Start date	
End date	
Grade	
Salary	
Reason for leaving (if	
applicable)	
Drief description of very duties	
Brief description of your duties and responsibilities	
and responsibilities	





Current/most recent employer	
Employer name	
Employer address	
Type of business	
Reporting to (Job title)	
Telephone	
Your job title	
Start date	
End date	
Grade	
Salary	
Reason for leaving (if	
applicable)	
applicable)	
Brief description of your duties	
and responsibilities	
Current/most recent employer	
Current/most recent employer	
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Employer name	
Employer address	
Turns of hypeirans	
Type of business	
Reporting to (Job title)	
Telephone	
Your job title	
Start date	
End date	
Grade	
Salary	
Reason for leaving (if	
applicable)	
Did in the	
Brief description of your duties	
and responsibilities	
If successful will this be your	only Yes No
form of employment?	,
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If successful will this be your only form of employment?	Yes No
If no, please give the name and address of any other employers:	Employer/Company Name: Company Address
If you are currently working, how much notice do you need to give?	
How long have you worked as a Personal Assistant?	





ION E. CERVICES PROVIDER	
ION 5: SERVICES PROVIDED	
d you prefer to work with?: Adult Child	
Or bo	
	,
Services	
Personal Care	Social engagement
Medication	Accessing Training and Education
Shopping	Accessing Volunteering and work
Preparing meals	Support with hobbies and interests
Attending health appointments	Support to access sporting opportunities
Accessing the community	Other
r please specify:	

SECTION 6: CHARGES

It is acceptable for approximate charges to be entered here, however, all fees and charges must be made clear to clients, in writing, before service delivery begins.

What is your minimum hourly rate?	£		
What is your maximum hourly rate?	£		
What is your mileage rate per mile?	£		
(leave at zero if you don't charge for			
mileage)			





SECTION 7: AVAILABILITY

	ay – if you hav no preference, l	•			uld you pre	efer	to start a	nd fin	ish wo	ork? (If
Start time			Fi	inish time	.					
Please cor	nplete the follo	wing table wi	th the c	days you	would be a	ava	ilable to v	vork		
		Mon	Tues	Weds	Thurs		Fri	Sat	Su	ın
	ning									
	rnoon									
	ning									
Nigl	าเ									
Are you ab	ole to work during the to work on E	Bank Holidays	s?		`	Yes Yes		No		
Barnack	Glinton & Wittering	Northborough	Eye Thor		Newborough Past		Paston	on Wa		Werrington North
Werrington South	Central Ward	Dogsthorpe	Ea		North		Park Ward	North Bretton		South Bretto
avensthorpe	Fletton & Woodston	Orton Longueville	Orto Ham		Central Stanground	5	East Stanground			ANY
SECTION Do you have use?	ve a full driving and adequate in 8: GENERAL ve any specialise give details	nsurance or b	ousines	s insurar	u can	Ye:		No [
years?	nad a DBS / CF					Yes	s 1	No [

You will need to provide proof of your DBS / CRB to the PA Register.
On employment you will be required to pay for a new DBS/ CRB and sign up to the update service (PCVS will facilitate this).





support										
ir so, pie	ease specify				Female		Male			
Are you	fluent in any o	ther lan	guages?			Yes	No			
f so, ple	ease circle:									
Jrdu Polish		Punjabi	Bengali Slovak	Gujrati Ukrainian	Kurdish	Farsi French	Turkish	Arabic	Albanian	
Chinese	Somali	.atvian	Siovak	UKTAITIIAIT	Bosnian	_ French	German	Spanish	English	
	ease state: vard in British Sign I	anguage								
Level 2 ce	rtificate in British Si	gn Langua								
	VQ certificate in Brit VQ certificate in Brit									
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_										
-	comfortable h	andling	/ preparir	ng meat an	d dairy	V	□ Na			
product	5?					Yes	No			
Are you	comfortable w	ith pets	?			Yes No				
•		•								
•	comfortable w	ith heig	hts or get	ting up and	d down					
stairs?						Yes	No			
Are vou	ı interested in a	ny of th	e followin	na activities	or interest	ts?				
riic you		ary Or ar	C TOHOWII	ig activities	or interest					
	Going to the cin	ema	Soc	cialising		Eating out				
C	Cooking		List	ening to m	usic	Live music / Festivals				
F	Reading		Ga	rdening		Playing sport				
	ishing			imming		Exe	rcise / Gym	า		
P	Arts and crafts		Pet	s / Animals	6					
	nal Informatio				liava mav k	a uaaful	l to olionto	for avam	nla	
	include any fur s. You can brief									
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SECTION 9: REFERENCES

Please provide the names and full contact details of two people who have agreed to supply references. References should include one previous employer where possible and preferably for employment in a position as a personal assistant or similar. A reference must not be from a personal acquaintance that is related to you or has any financial arrangement with you and will be required to comment on your competence, personal qualities and suitability for the post.

Please note that all references will be followed up **immediately** by PCVS as part of the approval process.

Referee 1 of 2	
Type of reference	
Email	
Title	
Surname	
First Name	
Relationship	
Address	
Telephone	
Fax	

Referee 2 of 2	
Type of reference	
Email	
Title	
Surname	
First Name	
Relationship	
Address	
Telephone	
Fax	





SECTION 10: SUBMIT & DECLARATIONS

Submit and Declarations Declaration

The information in this application form is true and complete. I agree that any deliberate omission, falsification or misrepresentation in the application form will be grounds for rejecting this application or subsequent dismissal if employed through the PA Register. Where applicable, I consent that PCVS can seek clarification regarding qualification and training details. I understand that by submitting this application record of my interest in the PA Register along with my email address will be held by PCVS.

I confirm that I have read and understood the Code of Conduct and have signed the attached copy.

* I agree to the above declaration
Print Name
Sign
Declaration * I confirm that I have read and understood the policies and agree to use the application in accordance with these terms and conditions. I understand that by submitting this application record of my interest in the PA Register along with my email address will be held by PCVS.
Print Name
Sign

Please send this completed form to:

Faith Boys
PA Register Applications
PCVS
3 Lincoln Court
Lincoln Road
Peterborough
PE1 2RP

Email: faith.boys@pcvs.co.uk



