

TRESCOBEAS SURGERY

Vacancy Application form

Application for employment as: PRACTICE NURSE

Full Name

Address:.....

Postcode

Telephone E-Mail.....

Education and training

Title, Date and results of any Educational (School, College, University) examinations taken

Hobbies/Interests

Employment history

1. Present or last employer

Address

Job title

Duties

Rate of pay

Date employed: from to

Reason for leaving

Previous employer before that

Address

Job title

Duties

Rate of pay

Date employed: from to

Reason for leaving

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

Please tell us about other jobs you have done and the skills you used and/or learned in those jobs.

Please tell us what you have to offer as a Practice Nurse?

Why do you want to work at Trescobeas Surgery?

Teamwork is important to us so please tell us what makes a good Treatment Room Team

Have you ever been convicted of a criminal offence? Yes No

(Declaration subject to the Rehabilitation of Offenders Act 1974)

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

Please tell us if there are any dates when you will not be available for interview

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.

Signature Date