

Initial Job Application Screening

1. Title (Mr / Mrs / Miss / Ms): _____

2. Name: _____

3. Home Address (please include full postcode): _____

4. Telephone Number (landline) _____

5. Mobile Number: _____

6. Email Address: _____

7. How did you hear about DT Careplus Ltd? _____

8. Do you have experience of working with children and/or adults who
have a disability? Yes No

9. Are you a car driver? Yes No

10. Do you have a valid full UK Driver's Licence? Yes No

Please note: *Company Cars are available for the service users' outings only*

11. Do you have a DBS Update Service Subscription? Yes No

12. Can you provide verifiable references from past and current employer/s and/or
professional character references? Yes No

If you have answered no to question 12, unfortunately, we will not be able to proceed
with your application.

Thank you for taking the time to complete this form. We will endeavour to contact you
within two weeks