

APPLICATION FOR EMPLOYMENT

Write clearly in block letters and give details in full.

JOB: _____

HOME: _____
Casa Arkati, Villa Messina, Zejtun Home, Cospicua Home, Prince of Wales

A. Personal Details

1. Surname: _____ Name: _____
2. Address: _____

Postcode: _____
3. Date of Birth: _____ Tel No: _____
4. Email Address: _____ Mobile No: _____
5. Nationality: _____ ID Card Number: _____
6. Gender: *Male* *Female*
7. Citizenship: *Maltese* *Foreign* *Dual*
8. Marital Status: *Single* *Married* *Widow/er* *Divorced* *Separated*
9. Name and Address of the person to be contacted in case of emergency: _____

10. Do/did you suffer from any significant health problems? **Yes** No
11. If **yes**, kindly state details: _____
12. Do you hold a current driving license? Yes No
13. Number of children: _____ Age(s): _____
14. Have you been previously employed with CareMalta? **Yes** No
15. If **yes**, state date and reason for termination: _____
16. Do you have any connections with other elderly services? **Yes** No
17. If **yes**, please state: _____
18. Do you have relatives residing within any of CareMalta's Homes? **Yes** No
19. If **yes**, please state: _____
20. Do you have any family members working with CareMalta? **Yes** No
21. If **yes**, please state: _____
22. Interests or hobbies, including social activities: _____

B. Education

- | | | | | |
|-----------|-----|--------------------------|----|--------------------------|
| Primary | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Secondary | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Tertiary | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

C. Employment History (start with the most recent employment)

FROM MONTH / YEAR	TO MONTH / YEAR	EMPLOYER	JOB TITLE	FINAL SALARY

D. Language Capabilities (please tick where applicable)

Language	Maltese	English	Other	Other
Speak				
Read				
Write				

E. Professional Associations / Institute Memberships

Please list all professional associations and institutes of which you are a member (Example: Trade union)

Additional Information

Please state why you are interested in the position you are applying for and explain how your qualifications and work experience relate to this post. Please supply any additional information you feel may assist the selection panel in evaluating your application for this post. You should include any unpaid or voluntary work experience or any leisure activities where you feel you have developed relevant skills.

REFERENCES

Please give the names, addresses and telephone numbers of two referees.

Name:	_____	Name:	_____
Address:	_____	Address:	_____
	_____		_____
Tel:	_____	Tel:	_____
Position:	_____	Position:	_____

POLICE CONDUCT

An original copy of your police conduct is required. If this copy is not provided, this application will **NOT** be accepted.

DECLARATION

By completing this form I confirm that the information contained in this document accurately represents my personal background and experience. I understand that any misrepresentation makes me liable to disqualification or dismissal should I be engaged.

I also agree that CareMalta may hold and process the information pertaining to or provided by me on this application form in accordance with current data protection legislation.

Signature: _____ Date: _____

Thank you for completing this form.