

Firstly I would just like to say a huge thank you for your offer of support during these difficult times. Please complete the attached form and send it back to the recruitment team [recruitment@york.nhs.uk](mailto:recruitment@york.nhs.uk). We have streamlined our recruitment processes to ensure we can bring extra staff into the Trust in the most effective and efficient way as possible. Please be assured that we will be back in touch with you as soon as possible.

**IMPORTANT – PLEASE READ**

**Your personal circumstances will dictate what sort of contract we will issue to you.**

**Bank contract** – you will be paid for any shifts worked. If you are a furloughed worker we recommend that you speak with your employer before proceeding with a bank contract to ensure that you are not breaking any terms and / or conditions of your employment.

**Honorary contract** – you will not be paid for any shifts worked. This may be more suitable for you if you are a furloughed worker.

Please note that the data you submit on this form will be transferred to this organisation’s third party system (TRAC) in order for us to proceed and complete the recruitment process. By submitting this form you are agreeing to this data transfer. You will receive an email once the data has been transferred to TRAC asking you to set up an account. Please do as this is most effective way for us to communicate with you.

**Personal details form- Staff support- COVID 19**

|  |  |  |  |
| --- | --- | --- | --- |
| Candidate’s Title / Name | | | |
| Title: | | |  |
| First Name (s): | | |  |
| Middle Name (s): | | |  |
| Family Name /Surname: | | |  |
| Address / Telephone Number | | | |
| Address: | Address Line 1 |  | |
| Address Line 2 |  | |
| Address Line 3 |  | |
| Town |  | |
| Postcode |  | |
|  | | | |
| Telephone Number: | |  | |
| Mobile Telephone Number: | |  | |
| Email Address: | |  | |
|  | | | |
| Date of Birth: | |  | |
| NI Number: | |  | |
| Are you registered with a professional body (NMC, HCPC)? If so please  provide your registration number:  Which is your preferred site?  (York or Scarborough) | |  | |
| Please delete the statement which is not applicable to you (this will determine how we bring you into the organisation) | | 1. I am not currently being paid by my employer / I am not in employment and I require a **bank** contract 2. I am being paid by my current employer – please specify which contract you require. \***Bank (paid)** / \***Honorary** **(unpaid)** **(please delete as applicable)** 3. Other – please specify at the end of the form | |
| Are you a medical student? | |  | |
| **Have you previously worked for York Teaching Hospital NHS Foundation Trust? If so please explain in what capacity and when you worked here.**  **Please provide us with information regarding your skills and experience; this will help with our decision making to place you in the appropriate area.**  **If you already have experience of working within an area in a particular specialty please provide some further details.** | |  | |

**Employment History**

Please record below details of the most recent role you have worked in.

|  |  |  |  |
| --- | --- | --- | --- |
| Have you ever worked for the NHS? | | | 🞎 Yes 🞎 No |
| Employer Name |  | | |
| Employer Address |  | | |
| Your Job Title |  | | |
| Start Date *(MM/YYYY)* |  | End Date *(MM/YYYY)* |  |
| Reason for leaving (if applicable) | | | |
|  | | | |
| Description of your duties and responsibilities | | | |
|  | | | |
|  | | | |
|  | | | |
|  | | | |
|  | | | |

**Referee 1**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| \* Type of Reference | 🞎 Employer 🞎 Educational 🞎 Personal | | | |
| Title |  | | | |
| \*Surname/Family name |  | \* First Name | |  |
| \*Relationship |  | | | |
| Employer Name |  | | | |
| Referee Job Title |  | | | |
| \*Address |  | | | |
| \*Post Code/ Zip Code |  | | | |
| Telephone |  | \*Country |  | |
| Email |  | Fax |  | |
| \*Can the referee be contacted now? | 🞎 Yes 🞎 No | | | |

**Data Protection and Privacy**

Your data will be held securely and in accordance with the Data Protection Act 1998 (DPA), the EU Data Protection Directive 95/46/EC, the General Data Protection Regulation (Regulation (EU) 2016/679 of the European Parliament and of the Council (GDPR), the Regulation of Investigatory Powers Act 2000, the Telecommunications (Lawful Business Practice) (Interception of Communications) Regulations 2000, the Electronic Communications Data Protection Directive 2002/58/EC, the Privacy and Electronic Communications (EC Directive) Regulations 2003 and all applicable laws and regulations relating to Processing of Personal Data and privacy, including where applicable the guidance and codes of practice issued by the Information Commissioner.