Application Form

**Applicant Ref:***(office use only)*

*THE FEDERATION IS AN EQUAL OPPORTUNITIES EMPLOYER*

Job Ref Number: **RGPP/CW/05/25**

Job Title: Relief GP Pharmacist  **Permanent**  Causeway GP Federation

Closing Date: **12 noon on Friday 23rd May 2025**

**NOTES:**

 CVs will not be accepted

 Canvassing will disqualify

 Incomplete applications will not be considered

 You are strongly encouraged to complete the equal opportunities section of this form which is used only

for monitoring/statistical purposes and is not made available to the panel

 Applications received after the closing date and time

will not be considered

* Applications must be completed and returned electronically

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| Surname: |       |  | Title (Mr, Mrs, Miss, Ms, Dr): |       |
| First Names: |       |  | Previous Surname: |       |
| Address: |       |  |  |  |
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|  |       |  |  |  |
| Postcode: |       |  |  |  |
| Contact Number: |       |  | National Insurance: |       |
| Email Address: |       |

 Do you hold a current full driving licence valid in the UK? Yes [ ]  No [ ]

 If required, do you have access to a car, or a form of transport Yes [ ]  No [ ]

 which will enable you to undertake the duties of this post?

Please name two referees (Please see information pack for more details):

 Title (Mr, Mrs, Miss, Ms, Dr):       Title (Mr, Mrs, Miss, Ms, Dr):

 Name:       Name:

 Occupation:       Occupation:

 Address:       Address:

 Postcode:       Postcode:

 Phone No:       Phone No:

 Email:       Email:

**FURTHER EDUCATION/ PROFESSIONAL QUALIFICATIONS**(e.g. Nursing, AHP, Social Care, Management, Administration)

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| **Certificate/Diploma/Degree** | **Institute** | **Exams yet to be taken** | **Result** | **Date Obtained** |
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**PROFESSIONAL QUALIFICATIONS**

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| **Name of Professional Body** | **Type of Registration** | **Professional Registration No.** | **Date Obtained** | **Date of Expiry** |
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Are you currently the subject of a referral to, or an investigation by, your professional body?

 Yes [ ]  No [ ]  Not Applicable [ ]

Have you been involved or are you currently involved in any professional or personal, unresolved or pending issue that might undermine your standing ability to do the job?

 Yes [ ]  No [ ]

**INDEPENDENT SAFEGUARDING AUTHORITY**

Have you ever been referred to the Independent Safeguarding Authority as a result of misconduct involving children and / or vulnerable adults? Yes [ ]  No [ ]

If yes, please provide full details below:

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**EMPLOYMENT HISTORY – PRESENT OR MAIN POST**

Employer Name:       Period of Notice:

Employer Address:       Salary / Wage:

       Job Dept / Location:

       Start Date:

Job Title:       Reason for Leaving:

Employment Status: Permanent [ ]  Temporary [ ]  Agency [ ]

Principle Duties of the Present Post:

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**EMPLOYMENT HISTORY — PREVIOUS POSTS**

Please list all your most recent previous posts beginning with the most recent.

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| **Name and Address of Employer** | **Job Title** | **Start Date** | **EndDate** | **Reason for Leaving** | **Duties** |
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If you have any gaps in your career history, please include and explain these in the box below.

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| **ESSENTIAL CRITERIA**You must demonstrate evidence of the following essential criteria by way of examples and dates in the box below. Please note the maximum word count is 300 words. |
| **Essential Criteria 1: *Applicants must hold valid registration with the Pharmaceutical Society of Northern Ireland (PSNI) or eligible for membership (please include your registration number). Please outline how you meet this criteria below:*** |
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| **ESSENTIAL CRITERIA**You must demonstrate evidence of the following essential criteria by way of examples and dates in the box below. Please note the maximum word count is 300 words. |
| **Essential Criteria 2: *Applicants must possess an Undergraduate Degree in Pharmacy. Please outline how you meet this criteria below:*** |
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| **ESSENTIAL CRITERIA**You must demonstrate evidence of the following essential criteria by way of examples and dates in the box below. Please note the maximum word count is 300 words. |
| **Essential Criteria 3: *Applicants must be willing and committed to undertake the required post-registration Pharmacist Foundation Programme (at the earliest opportunity on appointment). Please outline how you meet this criteria below:*** |
| I am willing to undertake the Pharmacist Foundation Programme on appointment:      I am **not** willing to undertake the Pharmacist Foundation Programme on appointment:       |

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| **ESSENTIAL CRITERIA**You must demonstrate evidence of the following essential criteria by way of examples and dates in the box below. Please note the maximum word count is 300 words. |
| **Essential Criteria 4: Independent PRESCRIBING – Applicants must meet one of the following criteria *. Please outline how you meet this criteria below:*** |
| I confirm that I am registered as an Independent Prescriber:      **OR**I am willing and committed to undertake the required Independent Prescribing qualification (at the appropriate point, as determined by the Lead GP Pharmacist):       |

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| **ESSENTIAL CRITERIA**You must demonstrate evidence of the following essential criteria by way of examples and dates in the box below. Please note the maximum word count is 300 words. |
| **Essential Criteria 5: *By 23rd May 2025, applicants should have a minimum of 3 years post-registration experience in pharmacy. (Failure to include dates may result in your application not being shortlisted). Please outline how you meet this criteria below:*** |
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| **ESSENTIAL CRITERIA**You must demonstrate evidence of the following essential criteria by way of examples and dates in the box below. Please note the maximum word count is 300 words. |
| **Essential Criteria 6: *Applicants must demonstrate an in-depth therapeutic and clinical knowledge and understanding of the principles of evidence-based healthcare. Please outline how you meet this criteria below:*** |
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| **ESSENTIAL CRITERIA**You must demonstrate evidence of the following essential criteria by way of examples and dates in the box below. Please note the maximum word count is 300 words. |
| **Essential Criteria 7: *Applicants must demonstrate knowledge of primary care prescribing, concepts of rational prescribing and strategies for improving prescribing. Please outline how you meet this criteria below:*** |
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| **ESSENTIAL CRITERIA**You must demonstrate evidence of the following essential criteria by way of examples and dates in the box below. Please note the maximum word count is 300 words. |
| **Essential Criteria 8: *Applicants must have experience in the use of clinical/IT systems. Please outline how you meet this criteria below:*** |
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| **ESSENTIAL CRITERIA**You must demonstrate evidence of the following essential criteria by way of examples and dates in the box below. Please note the maximum word count is 300 words. |
| **Essential Criteria 9: *Applicants must hold a full current driving license (valid in the UK) and have access to a car at the closing date or have \*\* access to a form of transport which will permit the applicant to carry out the duties of the post in full. (\*\* this relates only to any person who has declared that they have a disability, which debars them from driving). Please outline how you meet this criteria below:*** |
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| **THE SUCCESSFUL APPLICANT MAY BE REQUIRED TO WORK FLEXIBLY WITHIN THE ANTRIM BALLYMENA GP FEDERATION AREA; THIS WILL INVOLVE REGULAR TRAVEL BETWEEN GP PRACTICES – Are you willing to undertake this essential travel?****Yes** **[ ]** **No** **[ ]**  |

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| **DESIRABLE CRITERIA**You must demonstrate evidence of the following essential criteria by way of examples and dates in the box below. Please note the maximum word count is 300 words. |
| **Desirable Criteria 1: *Applicants should have a minimum of 6 months experience within General Practice Pharmacy. (Failure to include dates may result in your application not being shortlisted). Please outline how you meet this criteria below:*** |
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**CONVICTIONS / OFFENCES**

Under the Rehabilitation of Offenders (Exceptions) Order Northern Ireland, 1979, the Northern Ireland Health and Social Services are included in the list of excepted employers. As such, all criminal convictions may never be regarded as spent and must be disclosed when applying for a post in the Health Service. It is necessary therefore to ask the following questions:

**Have you ever been convicted of any criminal offence?** **Yes** [ ]  **No** [ ]

**Are you currently the subject of police investigation or Yes** **[ ]  No** **[ ]**

**do you have any prosecutions pending?**

List below details of ALL charges, prosecutions, convictions, cautions, bind-over orders—even if they happened a long time ago. You must include any minor matters, any road traffic or motoring offences

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*Please note that disclosure of a conviction does not necessarily debar any applicant from obtaining employment.*

**MEDICAL HISTORY**

Whether you have been in employment or not, please give details and dates of all periods of sickness over the past 3 years up to the date of this application.

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**DISABILITY**

**Do you require a reasonable adjustment for reasons related to a disability to allow you to:**

1. **Attend for interview?** **Yes** [ ]  **No** [ ]

If yes, please give details:

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**PERSONAL DECLARATION**

1. I declare that all the foregoing statements are true, complete and accurate

2. I understand that if I give wrong information or leave out important information I could be dismissed if I take up this job

3. I understand that to take up this job I must have satisfactory references, health assessment and Access NI checks (if applicable)

4. I understand that I will be asked to show some formal identification and evidence of qualifications if required

5. I confirm that as far as I know there are no medical reasons which would stop me from carrying out the duties of this job

6. I agree to you making any necessary enquiries during the recruitment and selection process

7. I understand that canvassing will disqualify me from the selection process for this job

8. I consent to the information I have provided being used within the context of the Data Protection Act 1998

**Your Signature:**       **Date:**

**Please indicate how you became aware of this vacancy:**

[ ]  Social Media [ ]  Professional [ ]  Radio

[ ]  Newspaper, please specify       [ ]  Other, please specify