

Bluebirds Childcare Job Application Form

Post Applied for:

Closing Date:

Office use only

Interview Date:

Office use only

Please complete this form fully using black ink or type. Applications received after the closing date will not normally be considered.

THE INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE.

Section 1 Personal details

Last Name:

First Name:

Date of Birth

Address:

Postcode:

Time at the above address:

If less than three years please supply the previous address below

Previous Address:

Postcode:

Home Telephone N^o:

National Insurance N^o:

Letters	Numbers	Letter
<input type="text"/>	<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Mobile Telephone N^o:

E-mail address:

Preferred method of contact

Mobile

☐

Email

☐

Are you free to remain and take up employment in the UK with no current immigration restrictions?

Yes

☐

No

☐

Driving Licence – if relevant to post applied for.

Yes

☐

No

☐

Do you hold a full, clean driving licence valid in the UK

If you are successful you will be required to provide relevant evidence of the above details prior to your appointment.

Section 2 Present Employment

Present Employment *(If now unemployed give details of last employer)*

Name of Employer:

Address:

Postcode:

Post Title:

Salary:

Employed From (Date):

TO (date):

Department / Section:

Brief description of duties:

Continue on a separate sheet if necessary

Period of Notice:

Last day of service

(if no longer employed):

Reason for leaving
(if no longer employed):

Section 3 Previous Employment

Previous Employment *(most recent employer first)*.

Name of Employer(1)

Address:

Postcode

Position Held:

From (Date) :

To (Date)

Summary of duties:

Reason for leaving:

Name of Employer(2)

Address:

Postcode

Position Held:

From (Date):

To (Date):

Summary of duties:

Reason for leaving:

Continue on a separate sheet if necessary

Section 4 Education

Qualifications obtained from Schools, Colleges and Universities. Please list highest qualification first:

School or College or University	Course	Qualifications and grades obtained

Continue on a separate sheet if necessary

Professional or Management Qualifications

Please give details:

Professional/ Management Qualifications	Course Details

Continue on a separate sheet if necessary

Section 5 Training and Development

Please give details of any training and development courses or non-qualifications courses which support your application. Include any on the job training as well as formal courses e.g, Safeguarding, First Aid, Child Protection, Food and Hygiene etc

Title of Training Programme or Course	Date Gained

Continue on a separate sheet if necessary

Section 6 Personal Statement

Abilities, skills, knowledge and experience.

Please use this section to explain in detail how you meet the requirements of the Job description. If you are or have been involved in voluntary/unpaid activities, please also include this information. Attach and label any additional sheets used.

Continue on a separate sheet if necessary

Section 7 Suitability

All employees will be working directly with children and are required to be police checked via the Criminal Records Bureau.

Have you been convicted of a criminal offence?

Yes

☐

No

☐

Do you have any current unspent convictions?

Yes

☐

No

☐

If you have answered yes please give details of the conviction(s) and date(s) in the space provided

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Section 8 Health

Number of days off sick in the last 2 years:

Please give details of any ongoing medical condition or treatment, which might affect your work

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Section 9 References

Please give the names and addresses of your two most recent employers (if applicable). If you are unable to do this, please clearly outline who your references are.

Reference 1		Reference 2													
Name:	<table border="1"><tr><td> </td></tr></table>	 	Name:	<table border="1"><tr><td> </td></tr></table>	 										
Position (job title):	<table border="1"><tr><td> </td></tr></table>	 	Position (job title):	<table border="1"><tr><td> </td></tr></table>	 										
Work Relationship:	<table border="1"><tr><td> </td></tr></table>	 	Work Relationship:	<table border="1"><tr><td> </td></tr></table>	 										
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E-mail:	<table border="1"><tr><td> </td></tr></table>	 	E-mail:	<table border="1"><tr><td> </td></tr></table>	 										

Are you willing for this referee to be approached prior to the interview?

Yes

☐

No

☐

Are you willing for this referee to be approached prior to the interview?

Yes

☐

No

☐

Section 10 Recruitment Monitoring Form

This sheet will be separated from your application form upon receipt and does not form part of the selection process. It will be retained by the Human Resources purely for monitoring purposes.

Application for the post of:

To help us ensure that our Equal Opportunities Policy is fully and fairly implemented (and for no other reason) please COMPLETE THIS SECTION OF THE APPLICATION FORM.

What is your Ethnic Group?

Choose ONE section from A to E, then tick the appropriate box to indicate your cultural background.

A. White

White UK

☐

Irish

☐

White non-UK

☐

Any other White background
(please give details):

☐

D. Black or Black British

Black Caribbean

☐

Black African

☐

Any other Black background
(please give details):

☐

B. Mixed

White & Black Caribbean

☐

White & Black African

☐

White & Asian

☐

Any other Mixed background
(please give details):

☐

E. Chinese or other ethnic group

Chinese

☐

Vietnamese

☐

Any other ethnic background
(please give details):

☐

C. Asian or Asian British

Indian

☐

Pakistani

☐

Bangladeshi

☐

Any other Asian background
(please give details):

☐

Section 10 Recruitment Monitoring Form continued

Gender

Male

☐

Female

☐

Disability

Disability is defined as “physical or mental impairment, which has a substantial and long term adverse effect on a person’s ability to carry out normal day to day activities”.

Do you consider yourself disabled?

Yes

☐

No

☐

If yes, please give details:

Age Group

16-25

☐

26-35

☐

36-45

☐

46-55

☐

56-65

☐

66-70

☐

Over 70

☐

Section 11 How did you learn about the Job (this part is compulsory)

Referral

Family/Friends

☐

Colleague

☐

Others (Please State)

Job Advertisement

(Please State)

Search Engine

(Please State)

Website

(Please State)

Section 12 Declaration

A. Statement to be Signed by the Applicant

Please complete the following declaration and sign it in the appropriate place below. If this declaration is not completed and signed, your application will not be considered.

I hereby give consent to storage and processing of my personal data and I agree that the information given on this form may be used for data registration purposes.

I hereby certify that:

- all the information given by me on this form is correct to the best of my knowledge
- all questions relating to me have been accurately and fully answered
- I possess all the qualifications which I claim to hold
- I have read and, if appointed, am prepared to accept the conditions set out in the conditions of employment and the job description.

Signed:

Date:

(NB. Candidates selected for interview will normally be notified within three weeks of the closing date. Unfortunately applicants who do not hear from us must conclude that their application has been unsuccessful on this occasion. Thank you for your interest in this post. If you would like to know if we have received your application form please enclose a stamped addressed post card.

The Management of Preschool / Out-of-school undertakes that it will treat any personal information (that is data from which you can be identified, such as your name, address, e-mail address etc) that you provide to us, or that we obtain from you, in accordance with the requirements of the Data Protection Act 1998.

RETURNING THIS FORM



Return to: The Personnel,
Bluebirds Day Nursery
68 London Road
Grays
Essex
RM17 5XX

For Office Use Only:

Start Date:

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