SANDCASTLES CHILDREN’S NURSERY

425 Marine Road East

MORECAMBE

LA4 6AA

Tel: 01524 831932

Please handwrite in black ink

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| **SANDCASTLES APPLICATION FORM** | | | Application date: | |  | |
| Position applied for: | |  | | | | |
| **PERSONAL DETAILS** | | | | | | |
| First names: |  | | Surname: |  | | |
| Full postal address:  Postcode: | |  | | | | |
| Home phone: |  | | Mobile: |  | |  |
| Email: |  | | | | | |
| Are you 17 years of age or over? YES NO  *Ofsted requires staff to be 17 years of age or over to work in ratio with children. Kitchen/ Housekeeping roles are not affected by this.* | | | | | | |
| **RIGHT TO WORK IN THE UK** | | | | | | |
| Do you have the right to work in the UK? | | | | YES | | NO |
| If you are not British or European Union national, are you entitled to take up employment in the UK? | | | | YES | | NO |
| Do you have a work permit? | | | | YES | | NO |
| If Yes please specify the terms of this permit / visa and expiry date: | | | | | | |
| *Please note: if you are successful in securing an interview you will need to provide proof of your qualifications and eligibility to work in the UK.* | | | | | | |
| **TYPE OF WORK** | | | |  | |  |
| Are you looking for full time or part time work? | | | | Full time | | Part time |
| Please indicate your availability to work (cross out sessions you are unavailable) | | | | | | |
|  | Mon | Tues | Weds | Thurs | | Fri |
| 8am-1pm |  |  |  |  | |  |
| 12pm-6pm |  |  |  |  | |  |

*Please sign if you wish Sandcastles to store this page and contact you as further vacancies arise.*

*Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

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| **EDUCATION AND QUALIFICATIONS** | | |
| Secondary school Subject | Qualification Grade Date | |
| **Example:**  **Maths** | **GCSE B June 1994** | |
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| Further education courses | Qualification Grade Date | |
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| Other relevant training / qualifications / Continuous Professional training e.g. first aid, safeguarding, forest school etc | | |
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| Other skills (Please detail other accomplishments e.g. computer fluency, dance training etc) | | |
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| **EMPLOYMENT / EXPERIENCE HISTORY** | | | | | | | |
| **1.** Current or most recent employer | |  | | | | | |
| Address |  | | | | | | |
| Phone number |  | | | | | | |
| Job title |  | | | | | | |
| Role / Main duties |  | | | | | | |
| Employment dates  (from – to) |  | | | | | | |
| Reason for leaving |  | | | | | | |
| Notice required |  | | | | | | |
| Final salary / hourly rate / work experience | | | | | |  | |
| Line manager |  | Permission to contact for reference? | Yes | | | No  (Please give detail) |  |
|  | |  | | | | | |
| **2.**Previous employer | |  | | | | | |
| Address |  | | | | | | |
| Phone number |  | | | | | | |
| Job title |  | | | | | | |
| Role / Main duties |  | | | | | | |
| Employment dates  (from – to) |  | | | | | | |
| Reason for leaving |  | | | | | | |
| Notice required |  | | | | | | |
| Final salary / hourly rate / work experience | | | | | | | |
| Line manager |  | Permission to contact for reference? | Yes | | | No  (Please give detail) |  |
| **3.** Previous employer | |  | | | | | |
| Address |  | | | | | | |
| Phone number |  | | | | | | |
| Job title |  | | | | | | |
| Role / Main duties |  | | | | | | |
| Employment dates  (from – to) |  | | | | | | |
| Reason for leaving |  | | | | | | |
| Notice required |  | | | | | | |
| Final salary / hourly rate / work experience | | | | | | | |
| Line manager |  | Permission to contact for reference? | Yes | | | No  (Please give detail) |  |
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| **4.** Previous employer | |  | | | | | |
| Address |  | | | | | | |
| Phone number |  | | | | | | |
| Job title |  | | | | | | |
| Role / Main duties |  | | | | | | |
| Employment dates  (from – to) |  | | | | | | |
| Reason for leaving |  | | | | | | |
| Notice required |  | | | | | | |
| Final salary / hourly rate / work experience | | | | | | | |
| Line manager |  | Permission to contact for reference? | Yes | | | No  (Please give detail) |  |
| *Please photocopy this page if your require further space to detail your career history* | | | | | | | |
| **WORKING IN CHILD CARE**  *Please answer the following questions drawing from work, home and school experiences, please continue on an additional sheet of paper if you feel you need more space to explain your skills and passion.* | | | | | | | |
| What motivates you to work with children? | | | | | | | |
| What strengths do you feel you will bring to the role you are applying for? | | | | | | | |
| What attracted you to apply to Sandcastles? | | | | | | | |
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| **INTERVIEW REQUIREMENTS** | | | | | | | |
| Please specify if you require any special arrangements to enable you to access an interview e.g. BSL / wheelchair access / large print fonts etc | | | | | | | |
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| **REFERENCES** |  |  |  | | |  |  |
| Please provide the names of two referees one of whom must be your current / most recent employer and the other a previous employer or professional acquaintance. They **must not be a close friend or member of your family**. | | | | | | | |
|  | Referee 1 | | | | Referee 2 | | |
| Name and Address: |  | | | |  | | |
| Telephone number: |  | | | |  | | |
| Occupation: |  | | | |  | | |
| Capacity in which they know you: |  | | | |  | | |
| May we contact this person immediately? |  | | | |  | | |
| **ALL SUCCESSFUL CANDIDATES WILL BE SUBJECT TO AN ENHANCED DISCLOSURE AND BARRING SERVICE CHECK (DBS) AND OFSTED CLEARANCES INCLUDING HEALTH CHECKS.** | | | | | | | |
| **DECLARATIONS** |  |  |  | | |  |  |
| The post you are applying for is exempt from the provisions of the Rehabilitation of Offenders Act 1974 (exemptions [Amendments] order 1986). It is a condition for employment that all convictions and cautions are disclosed (spent and unspent, including driving disqualifications) and in this respect checks will be made against you by Sandcastles who will apply for an Enhanced Disclosure Check using the Criminal Records Bureau (DBS). Sandcastles complies fully with the DBS and ICO codes of practice and undertakes to treat all applications for posts fairly. It undertakes not to discriminate unfairly against any subject of a disclosure on the basis of a conviction or other information revealed. Failure to disclose such information will be regarded as grounds for dismissal if you are appointed. Having a criminal record will not necessarily bar you from employment. | | | | | | | |
| Have you lived or worked abroad in the last 5 years? | | | | YES | | | NO |
| Have you previously been CRB / DBS checked? | | | | YES (Date): | | | NO |
| Are you signed up to the DBS update service? What are your check details?  Certificate number  Applicant surname  Applicant DOB | | | | | |  | |
| Have you any previous convictions / been cautioned / bound over? | | | | | | YES | NO |
| If yes please give details, if no please hand write ***“I have no convictions or cautions”:*** | | | | | | | |
| The role for which you are applying for involves significant contact with children and hence requires post holders to register with OFSTED. You will be required to complete OFSTED’s **Health Declaration** Booklet (HDB) to assess your medical suitability to work with young children. To complete this registration OFSTED will require details of any medical / health condition in the last 5 years which:   * Affects your physical ability i.e. stamina, walking, balance, bending, kneeling, lifting a child. * May impair your consciousness, make you black out, lose concentration or become confused or disorientated. * Affects your hearing in any way (after correction with any hearing device). * Affects your eyesight in any way (after any lens correction). * Causes depression, anxiety, panic attacks, mood swings, anger etc. * Causes severe pain. * Causes excessive drowsiness. * Affects you in any other way.   The health registration will also require details of any history of:   * alcohol or drug dependency or misuse. * contact with a significant infectious disease, such as tuberculosis or hepatitis. | | | | | | | |
| Please give details of any medical history that you feel may be relevant to the role and or to OFSTED’s clearance procedures:  Are you currently under the supervision of any medical practitioner? | | | | | | | |
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| I confirm that the information given on this form is to the best of my knowledge accurate, true and complete.  I understand that any false statements may be sufficient cause for rejection or if employed dismissal. | | | | | | | |
| Print name |  | | | | | Date |  |
| Signature |  | | | | | | |
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| Thank you for your interest in a career with Sandcastles.  Please hand deliver or post this completed form to:  Helen O’Hagan,  Sandcastles Children’s Nursery,  425 Marine Road East,  Morecambe  LA4 6AA | | | | | | | |
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