

Culverdene Day Nursery 32 Grainger Park Road Newcastle

NE4 8SA

0191 272 3774

Email: [culverdenenursery@gmail.com](mailto:culverdenenursery@gmail.com)

# Job application form

Application for the post of:

## Personal details

|  |  |  |
| --- | --- | --- |
| First names: |  | Surname: |

Address:

|  |  |  |
| --- | --- | --- |
| Home no: |  | Mobile no: |

email address:

## References

Please give the names and full addresses of two people who can verify or confirm your employment record. One must be your line manager at your current/last employer. Please do not use relatives, partners or friends as referees.

Name:

Position held and relationship:

Organisation name and address:

Telephone no:

email address:

|  |  |  |
| --- | --- | --- |
| May we contact the referee before  interview? | Yes | No |

Name:

Position held and relationship:

Organisation name and address:

Telephone no:

email address:

|  |  |  |
| --- | --- | --- |
| May we contact the referee before  interview? | Yes | No |

## Qualifications achieved (start with the most recent):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Secondary Schools,**  **Colleges, Universities**  **(**It is a requirement that you have C or above in English and Mathematics) | **From** | **To** | **Brief details of course and qualifications taken** | **Grade** |
|  |  |  |  |  |

**Study currently being undertaken:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Secondary Schools Colleges, Universities** | **From** | **To** | **Brief details of course and qualifications taken** | **Grade** |
|  |  |  |  |  |

Professional or other qualifications, apprenticeships, memberships of professional organisations:

Other training you have received which you consider relevant:

(It is requirement that you have a valid Emergency First Aid or Paediatric First Aid Qualification)

## Employment history

**Current/most recent employment:**

Name and address of employer:

Date started:

|  |  |  |
| --- | --- | --- |
| Until: |  | Notice required: |

|  |  |  |
| --- | --- | --- |
| Job title: |  | Final salary/ hourly rate: |

Brief description of duties:

Reason for leaving:

## Other employment/career history starting with the most recent:

*For posts which involve working with children, please give your full employment history; accounting for any gaps (please continue on a separate sheet of paper if necessary).*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Post** | **From** | **To** | **Employer/organisation**  **name and address** | **Reason for**  **leaving** |
|  |  |  |  |  |

Please give details of other interests, including involvement in voluntary organisations, which you consider relevant:

## Personal statement

Please give details and examples of the skills and aptitude you have relevant to this post.

# Declaration

The job for which you are applying involves substantial access to children and is therefore exempt from the Rehabilitation of Offenders Act 1974. You are therefore required to declare any convictions or cautions you may have, even if they would otherwise be regarded as ‘spent’ under this act. The information you give will be treated in confidence and will only be taken into account in relation to an application where this exemption applies

The disclosure of a criminal record will not debar you from appointment unless the company considers that the conviction renders you unsuitable for employment. In making this decision we will consider the nature of the offence, how long ago it occurred and what age you were when it was committed and any other factor which may be relevant. Failure to declare a conviction may however disqualify you from appointment or result in summary dismissal if a discrepancy is revealed once appointed.

Do you have a current DBS (Disclosure Barring Service)? If so please complete your details below.

Have you ever been convicted, cautioned or reprimanded for a criminal offence?

Yes No

DBS number

Date on DBS

Yes No

|  |  |  |
| --- | --- | --- |
| Are you on either of the two lists banning you from working with children or  vulnerable adults imposed by the Independent Safeguarding Authority? | Yes | No |

If yes, please give details and dates in the space provided below:

|  |  |  |
| --- | --- | --- |
| Do you need a work permit to work in the UK? | Yes | No |

National Insurance Number:

|  |  |  |
| --- | --- | --- |
| Do you have a driving licence? | Yes | No |

|  |  |  |
| --- | --- | --- |
| Do you have access to a vehicle? | Yes | No |
| If you do not drive how will  you travel to work? |  |  |

Please specify if you have any special requirements for the interview.

*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 could result in dismissal, disciplinary action or withdrawal of any offer of employment.*

|  |  |  |
| --- | --- | --- |
| Signature of applicant: |  | Date: |

Thank you for your interest and application for a career with Culverdene Day Nursery Please return this application form to

Jayne Metcalfe Nursery Manager

Culverdene Day Nursery 32 Grainger Park Road Newcastle

NE4 8SA

[culverdenenursery@gmail.com](mailto:culverdenenursery@gmail.com)

# Equal Opportunities statement

Culverdene Day Nursery is fully committed to the development of policies to promote equal opportunity in employment. In this respect, the setting will ensure that no job applicant or employee will receive less favourable treatment on the grounds of age, gender, marital status, race, religion, belief, colour, cultural or national origin or sexuality. In order to monitor the progress of our recruitment and selection practices, please complete the details on this sheet.

Recruitment monitoring

The following personal information will be kept securely and will not be used before or during short listing to ensure that only your abilities, experience, training and qualifications are considered.

Position applied for:

Name (forename(s) and surname in full):

Date of birth: Age:

|  |  |  |
| --- | --- | --- |
| Do you consider yourself to have a disability? | Yes | No |

|  |  |  |
| --- | --- | --- |
| Gender | Male | Female |

I would describe my race or ethnic origin as (please tick appropriate box):

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **White** |  | **Black/Black British** |  | **Asian or Asian British** |  | **Mixed** |  | **Other Ethnic Group** |  |
| White | ☐ | Caribbean | ☐ | Indian | ☐ | White/Black Caribbean | ☐ | Chinese | ☐ |
| White/Irish | ☐ | African | ☐ | Pakistani | ☐ | White/Black African | ☐ | Other Ethnic Group | ☐ |
| White/Other | ☐ | Other | ☐ | Bangladeshi | ☐ | White & Asian | ☐ | Traveller (Irish Heritage) | ☐ |
| Not Given | ☐ |  |  | Any other | ☐ | Other Mixed | ☐ | Gypsy / Roma | ☐ |