



Post applied for	
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Where did you see the vacancy advertised?	
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Surname		First name	
Address			
Postcode			
Home Tel:		Mobile Tel	

Marital Status		No of children	
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Ages of children	
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Current driving licence	Y	N
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Career History			
Please give details of your previous employment history starting with the most recent			
Employer & Address			
Job Title	Salary	£	
Summarise the nature of your work and job responsibilities/ achievements (if relevant)			
Date Joined Company		Date Left	
Reason for Leaving			



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Please give details of your previous employment history starting with the most recent			
Employer & Address			
Job Title		Salary	£
Summarise the nature of your work and job responsibilities/ achievements (if relevant)			
Date Joined Company		Date Left	
Reason for Leaving			
Employer & Address			
Job Title		Salary	£
Summarise the nature of your work and job responsibilities/ achievements (if relevant)			
Date Joined Company		Date Left	
Reason for Leaving			
Employer & Address			
Job Title		Salary	£
Summarise the nature of your work and job responsibilities/ achievements (if relevant)			
Date Joined Company		Date Left	
Reason for Leaving			



Child Care Qualifications
Please detail any qualifications you have which relate to Child Care and/ or Early Years Eductaion

Qualification	Where Gained	Date	Grade

Relevant Experience
What experience do you have of caring for or working with young children or any other caring activities
(There is no need to repeat experience detailed in the career history section of this form)

Other Qualifications (please detail any other qualifications you have)

Qualification	Where Gained	Date	Grade



<p>Health Please state how many days off work you have had due to sickness during the last 12 months</p>	<p>Y/ N</p>	<p>Have you seen a doctor within the last two years:</p>	<p>Y/ N</p>
<p>If you have answered yes, please state the reason</p>			
<p> </p>			
<p> </p>			

<p>Have you had an operation or serious accident or illness (within the past five years)?</p>	<p>Y/ N</p>
<p>If you have answered yes, please state the reason</p>	
<p> </p>	
<p> </p>	

<p>Are there any reasons why you think your present state of health may affect the way you look after or work with children?</p>	<p>Y/ N</p>
<p>If you have answered yes, please state the reason</p>	
<p> </p>	
<p> </p>	

<p>Have you ever been retired or had a contract of employment terminated with a past employer due to ill health?</p>	<p>Y/ N</p>
<p>If you have answered yes, please state the reason</p>	
<p> </p>	
<p> </p>	

<p>General Information - Is there any other information you would like to add about yourself? (You may continue to write on the back of this page)</p>
<p> </p>
<p> </p>
<p> </p>



Referees

I submit 2 referees (who can comment on my suitability to work with young children) 1 of which must be a previous employer:

1. Name			
Address			
Post Code		Tel No	
Email			

2. Name			
Address			
Post Code		Tel No	
Email			

Have you been disqualified from working with children?	Y/ N
Have you had any contact with social services?	Y/ N
If you have answered yes to either of the above questions please give details:	

Declaration:

1. I acknowledge that an appointment, if offered, will be subject to satisfy medical clearance. I am currently in good health.
2. I declare that I have not received any caution, warning, been reprimanded for any offences or been convicted of any criminal offence spent or otherwise (the post is exempt from the provisions of the Rehabilitation of Offenders Act)
3. I declare that the information given on this form is correct and understand that on appointment any misleading statements or deliberate omissions will be regarded as grounds for disciplinary action.



4. I hereby agree to you seeking/ releasing confidential references to anyone who so requests it. I understand that I may revoke this consent at any time and that I have the right under General Data Protection Regulations to request sight of a copy of each reference.

Signed: _____

Date: _____