BI	uebirds Childcare Job Application Form			
Post Applied for:				
Closing Date:	Office use only Interview Date: Office use only			
Please complete th normally be consid	is form fully using black ink or type. Applications received after the closing date will not ered.			
THEIN	NFORMATION 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 abov	ve address: If less than three years please supply the previous address below			
Previous Address:				
Postcode:				
Home Telephone N	National Insurance No. Letters Numbers Letter			
Mobile Telephone I	Nº:			
E-mail address:				
Preferred method of contact Mobile Text Email				
Are you free to remain and take up employment in Yes No the UK with no current immigration restrictions?				
<u>Driving License</u> – if relevant to post applied for. Do you hold a full, clean driving license 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	2	Present Em	ployment			
Present Empl	ovment	(If now unemployed give de	tails of last employer)			
Name of Emplo		(mnow unomproyed give de	tano or laot omproyory			
Address:						
Postcode:			Post Title:			
Salary:				(proof may b	e required)	
Employed From	Date):		TO (date):		
Department / S	ection:					
Brief descriptio	n of duti	es:				
·						
Continue o	n a sepa	rate sheet if necessal	ry			
Period of Notice	e:		Last day of se	ervice		
Reason for leav	/ing					
(if no longer employed):					

Section 3	Previous Employment
Previous Employme	nt (most recent employer first).
Name of Employer(1)	
Address:	
	Postcode
Position Held:	
From (Date):	To (Date)
Summary of duties:	
Reason for leaving:	
Name of Employar(2)	
Name of Employer(2)	
Address:	
	Postcode
Position Held:	
L	
From (Date):	To (Date):
L	
Summary of duties:	
Reason for leaving:	
iveason for leaving.	
Continue on a separate	sheet if necessary
Sontinue on a separate	- Chook in Household y

	om Schools, Colleges and	Universities. Plea	ase list highest qualification first:		
School or College or University	Course		Qualifications and grades obtained		
Continue on a separate s	sheet if necessary				
Professional o	or Management	Qualificat	tions		
Please give details:					
Professional/		Co	ourse Details		
Management Qualific	ations		buise Details		
Continue on a separate s	shoot if noossary				
Continue on a separate s	neet ii 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 Train	ing Programme or Cours	se	Date Gained		
Continue on a separate sheet if necessary					

Section 4

Education

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 Disclosure and Baring Service.					
Have you	been convicted of a criminal offence?		Yes No		
Is there ar	ve any unspent convictions? nyone in your household who is disqualified r vulnerable adults?	from working with	Yes No T		
If you have answ	vered Yes please give details of the co	nviction(s) and date((s) in the space provided		
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					
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:		Name:			
Position (job title):		Position (job title):			
Work Relationship:		Work Relationship:			
Organisation:		Organisation:			
Address:		Address:			
	Postcode		Postcode		
Telephone Nº:	1 osteode	Telephone Nº։	T OSICOGE		
E-mail:		· E-mail:			
Are you willing for this referee to be approached prior to the interview? Are you willing for this referee to be approached Yes No prior to the interview?					

Application for the post of: To help us ensure that our Equal Opportunities Policy is fully and fairly implemented (and for no other reason) ples 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 D. Black or Black British Black Caribbean White Non-UK Any other white background (please give details): White & Black African White & Black African White & Black Caribbean Chinese C	Section 10	Recruitment	Monitori	ng Form			
To help us ensure that our Equal Opportunities Policy is fully and fairly implemented (and for no other reason) plead 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 D. Black or Black British White UK Irish White non-UK Any other white background (please give details):	This sheet will be separated from your application form upon receipt and does not form part of the selection						
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): B. Mixed White & Black African White & Black Caribbean Any other ethnic group Chinese White & Black Caribbean (please give details): C. Asian or Asian British Indian Pakistani Bangladeshi Any other Asian background (please give details): Gender Male Female Age Group (please circle as applicable): 16-25 26-35 36-45 Disability Disability is defined as "physical or mental	Application for the po	ost of:					
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): B. Mixed White & Black African White & Black Dackground (please give details): E. Chinese or other ethnic group Chinese White & Black Caribbean White & Black African White & Black Dackground (please give details): C. Asian or Asian British Indian Pakistani Bangladeshi Any other Asian background (please give details): Any other Asian background (please give details): Age Group Male Female Age Group Age Group Johnson Asian British Indian Pakistani Bangladeshi Any other Asian background (please give details): Age Group Johnson Asian British Indian Pakistani Bangladeshi Any other Asian background (please give details): Age Group Johnson Asian British Indian Pakistani Bangladeshi Any other Asian background (please give details):				fairly implement	ted (and for no	other reason) p	lease
White UK Irish White non-UK Any other white background (please give details): B. Mixed White & Black African White & Black background (please give details): E. Chinese or other ethnic group White & Black Caribbean White & Black Caribbean White & Asian Any other ethnic background (please give details): (please give details): C. Asian or Asian British Indian Pakistani Bangladeshi Any other Asian background (please give details): Gender Male Female Age Group (please circle as applicable): Gender Male Female 16-25 26-35 36-45 Disability Disability is defined as "physical or mental"			appropriate be	ox to indicate yo	our cultural back	kground.	
Irish White non-UK Any other white background (please give details): B. Mixed	A. White		D. BI	ack or Black B	ritish		
White non-UK Any other White background (please give details): B. Mixed	White UK			Black African			
Any other white background (please give details): B. Mixed	Irish						
(please give details): B. Mixed	White non-U	K		•	· ·		
B. Mixed White & Black African White & Black Caribbean White & Asian Any other Mixed background (please give details): C. Asian or Asian British Indian Pakistani Bangladeshi Any other Asian background (please give details): Gender Male Female Age Group (please circle as applicable): 16-25 26-35 36-45 Disability Disability Disability is defined as "physical or mental"	Any other wh	nite background		(please give o	details):		
White & Black African	(please give	details):					
White & Black African							
White & Black Caribbean	B. Mixed		E. Ch	inese or other	ethnic group		
White & Asian	White & Blac	ck African		Chinese			
Any other Mixed background	White & Blac	ck Caribbean		Vietnamese			
(please give details): C. Asian or Asian British Indian Pakistani Bangladeshi Any other Asian background (please give details): Gender Male Female Age Group (please circle as applicable): 16-25 26-35 36-45 Disability Disability is defined as "physical or mental				Any other eth	nic background		
C. Asian or Asian British Indian Pakistani Bangladeshi Any other Asian background (please give details): Gender Male Female Age Group (please circle as applicable): 16-25 26-35 36-45 Disability Disability is defined as "physical or mental	·	J		(please give o	details):		
Indian Pakistani Bangladeshi Any other Asian background (please give details): Gender Male Female Age Group (please circle as applicable): 16-25 26-35 36-45 Disability Disability is defined as "physical or mental	(please give	details):					
Indian Pakistani Bangladeshi Any other Asian background (please give details): Gender Male Female Age Group (please circle as applicable): 16-25 26-35 36-45 Disability Disability is defined as "physical or mental							
Pakistani Bangladeshi Any other Asian background (please give details): Gender Male Female Age Group (please circle as applicable): 16-25 26-35 36-45 Disability Disability is defined as "physical or mental	C. Asian or Asian B	British					
Bangladeshi Any other Asian background (please give details): Gender Male Female 16-25 26-35 36-45 Disability Disability is defined as "physical or mental	Indian						
Any other Asian background (please give details): Gender Male Female Age Group (please circle as applicable): 16-25 26-35 36-45 Disability Disability is defined as "physical or mental							
(please give details): Gender Male Female Age Group (please circle as applicable): 16-25 26-35 36-45 Disability Disability is defined as "physical or mental	J						
Gender Male Female 16-25 26-35 36-45 Disability Disability is defined as "physical or mental Age Group (please circle as applicable): 16-25 46-55 56-65 66-70	,	•					
Male Female 16-25 26-35 36-45 Disability Disability is defined as "physical or mental 46-55 56-65 66-70	(please give	details):					
Male Female 16-25 26-35 36-45 Disability Disability is defined as "physical or mental 46-55 56-65 66-70							
Disability Disability is defined as "physical or mental 16-25 26-35 36-45 46-55 56-65 66-70	Gender		Ą	ge Group (please	circle as applicable):		
Disability is defined as "physical or mental	Male	Female		16-25	26-35	36-45	
Disability is defined as "physical or mental				46-55	56-65	66-70	
			, torm		30 03	00.70	
impairment, which has a substantial and long term adverse effect Over 70 Disability Details		ias a substantial and long					
on a person's ability to carry out normal day to		ty to carry out normal day	to E	isability betails			
day activities".	day activities".						
Do you consider yourself Yes No	Do you consider yo disabled?	ourself Yes	No 🗌				
If yes, please give details in the box on the right:		jive details in the box on	the				

Section 11 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 certify that:

C. Privacy Notice

I have read the privacy notice for job applicant

- 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:	
who do no	lidates selected for interview will normally be notion the selected for interview will normally be notion the selected for interview will normally be notionally selected you would like to know if we have received you	on has been unsuccessfu	l on this occasion. Thank you for your interest
B. Data	Processing Consent	h arabu giya mu	rancont to Divobirde Children LTD to process th
following	information:	[Your name], Hereby give my (consent to Bluebirds Childcare LTD to process th
Personal (Name Date of birth Contact details, including telephone number, em Experience, training and qualifications CV National insurance number Any other relevant personal data personal data	nail address and postal ac	ddress
•	Disability/health condition relevant to the role Criminal conviction Any other relevant sensitive personal data		
I consent • •	to Bluebirds processing the above personal data for Recruitment purpose. For the Company to process with or transfer my post I applied. For the Company to process my data on a compu	personal data to their cl	ients in order to check my suitability for the
	sent to the Nursery processing my personal data w tigations carried out on the Company to ensure th ations.		
The conse	ent I give to the Company will last for at least 3 year longer.	ars, or more where the C	ompany has a legal requirement to retain the
I am awar	re that I have the right to withdraw my consent at	any time by informing th	ne Company that I wish to do so.
Signe	d by Applicant:		
Date:	:		

Section 12 Safeguarding Statement

Bluebirds is committed to safeguarding and promoting the welfare of children and young people and expect all applicants to share this commitment.

Do you agree to share this commitment? Yes/No (please circle as applicable)

Section 13 How did you learn	about the job
Referral Family/Friends	Job Advertisement (Please State)
Colleague	
Others (Please State)	Website
	(Please State)
Search Engine	Others
Please State)	Please State)

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