Rose Tree Cottage, Winterborne Stickland, Blandford DT11 0NW **Tel |** 07714 364750

**Email |** hello@winterbornesticklandnursery.co.uk **Website |** www.winterbornesticklandnursery.co.uk

**Position applied for** 

#### **APPLICATION FORM**

Please complete this form in **type** or **black ink**. We request that **all** questions be answered in the boxes provided.

**Closing Date** 

	PERSONA	L DETAILS		
First Name(s)	Surname		Date of	
			Birth	
Address				
Postcode		Home Telephone No	o.	
Mobile Telephone		Work Telephone No	o.	
No.				
Email Address				

#### **REFERENCES**

- o Please give the names, addresses and contact details of two people who have agreed to act as references and can verify or confirm your employment
- o One should be your present or most recent employer
- **o** The referees should be your immediate line manager, if this is not the case please give details of the relationship. Please do not use relatives, partners or friends as referees

Name	Name	
Position	Position	
Address	Address	
Email	Email	
Telephone	Telephone	

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May we contact the	Yes	May we contact the	Yes
referee before	No	referee before	No
interview? Please		interview? Please	
delete yes/ no as		delete yes/ no as	
appropriate.		appropriate.	
Do you need a work	Yes	National Insurance	
permit to work in the	No	Number	
United Kingdom?			

QUALIFICATIONS ACHIEVED				
Please list most recently achieved first				
Universities, Colleges,	From	То	Full name of Qualification(s)	Grade
Secondary Schools			as it appears on certificate	

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		APPL	ICATION FORM	
	1			
	QUALIFIC	CATIONS	CURRENTLY BEING UNDERTAKEN	
Universities, Colleges, Secondary Schools	From	То	Full name of Qualification(s)/Course(s)	Grade

Professional or other Qualifications, Apprenticeships, Memberships of Professional Organisations

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Details of training you have received which you consider relevant			
	(Paediatric First Aid, Sa	nfeguarding etc.)	
	HEALTH	1	
Disability or health proble	ems <u>do not</u> preclude full	consideration for the position	applied for
Please give the number of sick		Please give the number of	
days in the last twelve months		separate occurrences in the	
		last twelve months	

Do you have a driving licence?	Yes
Please delete yes/ no as appropriate	No
Do you have access to a vehicle?	Yes
	No
Do you have reasonable access to public transport?	Yes
	No
Do you have any relationship (i.e. family, friends)	Yes
with anyone working for Winterborne Stickland	No
Nursery?	

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EMPLOYMENT HISTORY					
O Please give details of your <u>current</u> or <u>most recent</u> employer					
Job Title	Job Title				
Organisation/Company Name					
Address					
Postcode				Date started	
Notice period		Basic salary		Date ended	
(if applicable)		per annum/ hourly rate		(if applicable)	
Brief description of duties	nourly race				
Reason for leaving					
	EMF	PLOYMENT HIST	ORY		
<b>o</b> For positions applied for	or which involve	working with chi	ldren, pleas	e give <u>full</u> employn	nent history,
accounting for any gap	accounting for any gaps				
o Please start with the <u>most recent first</u> and continue on a separate sheet of A4 paper if necessary					
From	То	Company/ Organisation Name	Address	Job Title	Reason for leaving

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### **APPLICATION FORM**

Employment history continued on a Yes separate sheet of A4 paper? No

#### **STATEMENT**

- o Having read the job description and person specification, please state how your experience and achievements to date make you a suitable candidate for this position.
- o If you need to continue beyond this page, please use a separate sheet of A4 paper

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APPLICATION FORM
STATEMENT (Continued)

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APPLICATION FORM					

paper?

No

Statement continued on a separate sheet of A4

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### **APPLICATION FORM**

Please give details				oluntary organisations, which	
	you may cons	sider rele	<u>vant</u>		
				_	
	DECLAF	RATION			
Any of the above info	rmation may be subject to verific		derstand t	hat any false, inaccurate or	
•	•			•	
incomplete information could result in dismissal, disciplinary action or withdrawal of any offer of employment.					
I declare that the info	ormation given on this form is, to	the best of	my know	ledge, correct and complete and	
can be treated as par	t of my subsequent contract for e	mploymen	t.		
I understand that Wi	nterborne Stickland Nursery Scho	ol may pro	cess by m	eans of a computer database or	
• •	nation which I provide to it, for th	e purpose	of employ	ment with Winterborne Stickland	
Nursery School.					
<b>-</b> : / \					
First name(s)		3	Surname		
Cianatura			Data		
Signature			Date		
				<u> </u>	
Please submit co	mpleted electronic application for	ms, equal	hello@w	vinterbornesticklandnursery.co.uk	
opportunities forms and disclosure and barring declarati			to		
Please submit completed paper application for			Rose Tree Cottage, The Triangle,		
opportunities forms and disclosure and harring declaration in					

questions on

**DT11 0NW** 

07714 364750

A4 sized envelope marked CONFIDENTIAL to

Please call a member of the Board of Trustees if you have any

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#### **APPLICATION FORM**

EQUAL OPPORTUNITIES MONITORING FORM – CONFIDENTIAL					
Position applied for		Date of birth		Age	
First name(s)		Surname			
First name(s)		Surname			1

We are committed to equal opportunities in employment. As part of this policy, all applicants for employment are requested to complete this section for the purposes of monitoring the policy and it will be separated from your application. The information it contains will not be used in deciding whether or not to invite you to interview or offer you employment. As an equal opportunities employer, we aim to ensure that no job applicant or employee receives less favourable treatment on the grounds of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation. Please help us achieve our main aim by completing the following questions.

If you are invited to attend an interview or take up employment and require special arrangements please give details	
I would describe my race or ethnic origin as (please tick appropriate box)	<ul> <li>White British</li> <li>White Irish</li> <li>White other</li> <li>Black African</li> <li>Black Caribbean</li> <li>Black other</li> <li>Bangladeshi</li> <li>Pakistani</li> <li>Indian</li> <li>Asian other</li> <li>Chinese</li> <li>other</li> </ul>

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Gender	White and Black Caribbean  White and Black African  White and Black Asian  Other (please state)  -  Female  Male  Other (please state)  -  state)  -  Indicates the state of				
Do you consider yourself to	Yes				
have a disability? Please	No				
delete yes/ no as appropriate   EQUAL OPPORTUNITIES MONITORING FORM - CONFIDENTIAL					
This post is exempt from the provisions of the Rehabilitation of Offenders Act 1974, please complete the					
section below.					
Have you ever been convicted, cautioned or reprimanded for a criminal offence? Yes  Please delete yes/ no as appropriate  No					

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Are you on either of the vulnerable adults in		Yes No			
If you have answered yes to	If you have answered yes to any of the above, please give details and dates in the space provided below				
Do you require a work permit to work in the UK? Yes No					
Nationa	110				
How did you find out	Dorset For You				
	Total Jobs				
	Childcare Jobs Dorset				
	Facebook Other (please specify)				
	Other (picase specify)				
I consent to Winterborne Stickland Nursery School holding the data in the equal opportunities section of this form in their database and manual file					
Signature of applicant			Da	te	