



Springles Day Nurseries

Application Form

Thank you for expressing interest in working for Springles. In order to give us the best possible opportunity to assess your application fairly, we want to know about your skills, qualifications and experience. Please complete this form as fully as possible. If you already have some of this information in a curriculum vitae, please feel free to attach it and write "see CV" in the appropriate sections below, but don't forget to sign the declaration on the final page. Thank you.

Please complete all sections in type or black ink.

PERSONAL DETAILS

Family name or surname:
Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other _____
First name(s):
Date of birth:
Address:
Postcode:
Home telephone:
Mobile telephone:
Email address:
National insurance number:
Nationality:

POSITION APPLIED FOR

Job Title:																		
Location:																		
Hours of work: Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary <input type="checkbox"/>																		
If you are applying for part-time work, please tell us the hours when you are available: <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td></td> <td>Mon</td> <td>Tues</td> <td>Weds</td> <td>Thurs</td> <td>Fri</td> </tr> <tr> <td>From:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>To:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		Mon	Tues	Weds	Thurs	Fri	From:						To:					
	Mon	Tues	Weds	Thurs	Fri													
From:																		
To:																		
If you are applying for temporary work, please give the dates when you are available for work: From: _____ To: _____																		
Where did you see this position advertised or hear about it? Local press <input type="checkbox"/> Nursery World <input type="checkbox"/> Friend <input type="checkbox"/> Springles Website <input type="checkbox"/> Other website <input type="checkbox"/> College <input type="checkbox"/> Job centre <input type="checkbox"/> Other (please state): _____																		

EDUCATION AND QUALIFICATIONS

Please tell us about your secondary schools, further/higher education and professional training.

Dates		Schools and Colleges	Courses and qualifications gained
From	To		

EMPLOYMENT HISTORY

Please tell us about your current and past employment, including any part-time, casual or voluntary work of a regular nature that you think is relevant to the job for which you have applied. Please start with your present or most recent job.

Present / most recent employer:	
Address:	
Last position held:	
Main responsibilities:	
Start date:	Leaving date or notice required:
Reason for leaving:	

Previous employer:	
Address:	
Last position held:	
Main responsibilities:	
Start date:	Leaving date:
Reason for leaving:	

Previous employer:	
Address:	
Last position held:	
Main responsibilities:	
Start date:	Leaving date:
Reason for leaving:	

Previous employer:	
Address:	
Last position held:	
Main responsibilities:	
Start date:	Leaving date:
Reason for leaving:	

If you have had more than 4 jobs, please attach a CV or continue on a separate sheet.

MEDICAL HISTORY

Please give details of any serious accidents, disabilities or illness:	
Number of working days lost to illness in last two years:	Number of occasions:
Do you require any special arrangements at interview, i.e. sign language?	

MISCELLANEOUS INFORMATION

Current Salary:	Desired salary:
Other benefits received:	Do you smoke: Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have a current first aid certificate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you have a current Police / CRB check? Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have a clean full driving licence? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you a car owner? Yes <input type="checkbox"/> No <input type="checkbox"/>

REFERENCES

Please provide details of two referees, one of whom must be your current employer if you are working, or your last employer if you are not, and the other a previous employer or somebody that you know professionally. They must not be a friend or a member of your family. All offers of employment are subject to the receipt of satisfactory references, but we will not approach referees until we have made you an offer.

Name:	Name:
Address:	Address:
Postcode:	Postcode:
Telephone no:	Telephone no:
Occupation:	Occupation:
Relationship to you:	Relationship to you:

MORE ABOUT YOU

Please tell us about anything that you think will help us in evaluating your application. You may wish to tell us more about your past experience within childcare, including relevant experience gained at work, in a voluntary capacity, or at home; explain your ambitions for the future; discuss why you enjoy childcare; or maybe tell us about any relevant hobbies that you may have.

DECLARATIONS

Because the job for which you are applying involves substantial access to children, it is 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 strict confidence.

The disclosure of a criminal record will not prevent you from being employed by Springles unless we consider that the conviction indicates that you are unsuitable for the position. We will take into account the nature of the offence, how long ago and what age you were when it was committed, and any other factor, which may be relevant. Failure to declare a conviction however, may disqualify you from appointment, or result in dismissal when the discrepancy is discovered later.

Have you any previous convictions or been cautioned or been bound over? Yes No
If yes please give details:

I confirm that the information given on this form and any CV supplied with it or separately is, to the best of my knowledge, true and complete. I acknowledge that any false statement may be sufficient cause for this application to be rejected or, if I have been employed, result in my dismissal.

Signature:

Date:

EQUAL OPPORTUNITIES

At Springles we believe strongly in equal opportunities and are committed to non-discriminatory employment practices that provide genuine equality of opportunity. We believe in a working environment that values individual strengths and abilities and ensures that all employees and job applicants are treated equally, without regard to disability, marital status, sexual orientation, race or sex. It would help us to monitor the effectiveness of this policy if you would answer the following questions, but **if you chose not to answer any or all of these questions, it will not adversely affect your application**. All information given will be treated as confidential.

Ethnic Origin

Please tick the boxes that in your opinion best describe your cultural and ethnic origin.

White <input type="checkbox"/>
British <input type="checkbox"/> Irish <input type="checkbox"/> Other _____
Asian / Asian British <input type="checkbox"/>
Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Other _____
Mixed <input type="checkbox"/>
White / Black Caribbean <input type="checkbox"/> White / Black African <input type="checkbox"/>
White / Asian <input type="checkbox"/> Other _____

Black / Black British <input type="checkbox"/>
Caribbean <input type="checkbox"/> African <input type="checkbox"/> Other _____
South East Asian / Other Ethnic Origin <input type="checkbox"/>
Chinese <input type="checkbox"/> Japanese <input type="checkbox"/> Other _____

Gender

Male <input type="checkbox"/>	Female <input type="checkbox"/>
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Marital Status

Married <input type="checkbox"/>	Single <input type="checkbox"/>	Other <input type="checkbox"/>
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Disability

Disability is defined in the Disability Discrimination Act 1995 as 'a physical or mental impairment, which has a substantial and long term adverse effect on a person's ability to carry out day-to-day activities'.

Do you have a disability as defined above? Yes No

If yes, what is the nature of your disability: