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| Setting Applied (Please state which nursery you are applying for) - |
| Position Applied: |

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| Title  Surname:  First name(s):  Address:  Postcode:  Telephone: Home: Mobile:  Email address: |

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| Statement in support of application.  Please use this space to tell us how your skills and experience would make you the right candidate for this job. We need to have this information in order to consider your application. |

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| If appointed for the post, when will you be able to start:  ...............................................................................................................................................  Please give date(s) of any planned holiday or other commitments which would require time off, if appointed:  ...............................................................................................................................................  Please give details of any illness or disability which might require special arrangements to be made or require absences from work for consultation or treatment:  ..................................................................................................................................................  …………………………………………………………………………………………………………..  Do you have a second job? How could this impact your position with Chestnut Nursery School…….  ………………………………………………………………………………………………………………………………………  ……………………………………………………………………………………………………………………………………… |

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| Education | Dates From: | Dates to: | Qualifications |
| College/University: |  |  |  |

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| Any other achievements you feel is important to note: |

**Employment Record: Please start with your current job/position**

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| Job Title:  Company worked for:  From: to:  Current Salary:  Responsibilities and duties:  Reason(s) for wanting to leave/change job: |
| Job Title:  Company worked for:  From: to:  Salary:  Responsibilities and duties:  Reason(s) for wanting to leave/change job: |
| Job Title:  Company worked for:  From: to:  Salary:  Responsibilities and duties:  Reason(s) for wanting to leave/change job: |

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| What are your career objectives for the next three years? |

**References**: Please give details of two persons who can provide professional references on your behalf. One must be your last employer.

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| Name:  Company Name:  Position:  Full Address:  Telephone number:  Email address – (Please provide a company email address)  May we approach this person for a reference now? YES/NO | Name:  Company Name:  Position:  Full Address:  Telephone number:  Email address: (Please provide a company email address)  May we approach this person for a reference now? YES/NO |

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| **This appointment is excluded from the non-disclosure provisions under the Rehabilitation of Offenders Act 1974. Applicants must declare any convictions which for other purposes are “spent” and in the event of employment, failure to disclose such convictions could result in dismissal or disciplinary action. Any information will be treated confidentially.**  Do you have any spent or unspent criminal convictions? YES/NO  If yes, please give details.................................................................................................  .........................................................................................................................................  Are you currently under investigation, awaiting trial, verdict or sentencing in any criminal proceedings? YES/NO  If yes, please give details…………………………………………………………………….  ……………………………………………………………………………………………………  Are you disqualified from working with children? YES/NO  If yes, please give details................................................................................................  ……………………………………………………………………………………………………  Do you have the right to work in the UK? YES/NO |
| |  | | --- | | **I declare that the information I have given on this application form is correct. I understand that any offer of employment will be subject to satisfactory references and DBS checks. Any misleading statements or deliberate omissions will disqualify my application and lead to instant dismissal.**  **I consent to the necessary enquiries and checks being undertaken by Chestnut Nursery Schools Ltd in order to confirm that the information I have included in this application form is correct and to verify the authenticity of my qualifications.**  Signed...............................................Date............................................. | |
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