

St Bernards Pre-school Playgroup - Playgroup Assistant

Surname	
Forename(s)	
Name usually known by	
Title	
Previous Surnames (if applicable)	
Date of Birth	
Address	
Postcode	
Phone Number (Home)	
Phone Number (Mobile)	
Email address	

Please list all relevant qualifications and training that may help you to work with children (i.e. Childcare qualifications, First Aid, Safeguarding, Food hygiene training)

Dates	School / College / Training Organisation	Qualifications	Subject	Grade

Employment History (continue on separate sheet if necessary)

Dates	Employer	Role	Duties	Reason for leaving

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Please give details of any medical conditions or disabilities that may affect your ability to work with young children:

Safety & Security

The safety and security of children is paramount for us. All information is held strictly confidentially. Answering yes to any of the questions below may not necessarily preclude your involvement. Thank you for your understanding.

Have you ever been accused of, arrested for, convicted of, or are you currently under investigation for a criminal offense excluding minor traffic violations? Yes ☐ No ☐

Are you disqualified from working with children or vulnerable adults Yes ☐ No ☐

Have you ever been hospitalized or treated for alcohol or substance abuse? Yes ☐ No ☐

Have you ever been accused of, arrested for, convicted of, or are you currently under investigation for any sexually related or abuse related crimes? Yes ☐ No ☐

Are there any circumstances involving your lifestyle or your background that would call into question your ability to work with children? Yes ☐ No ☐

If you answered yes to any of the above questions please explain:

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Reference Request

Please provide details of two referees (one should be a recent employer; please note that referees should not be relatives)

Referee 1		Referee 2	
Name:		Name:	
Job Title:		Job Title:	
Organisation / Address:		Organisation / Address:	
Postcode:		Postcode:	
Phone number:		Phone number:	
Email address:		Email address:	
In what capacity do you know them?		In what capacity do you know them?	

I confirm that the information contained in this application is correct to the best of my knowledge.

I authorise any referees or organisations listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for working with children.

I understand that any false statements or omissions on this application may be grounds for rejection of my application.

I agree to St Bernards Pre-school Playgroup holding and processing this information.

I understand that roles involving working with children are subject to enhanced Criminal Records disclosure checks and relevant checks undertaken by North Eastern Health and Social Care Trust (NEHSCT)

Applicant's Signature: _____

Date: _____

Completed application to be returned to stbernardsplaygroup@icloud.com