

**HIGHWAY DAY NURSERY**  
**APPLICATION FORM**

**Personal Information**

<b>Title:</b>
<b>First name(s):</b>
<b>Last Name:</b>
<b>Any previous names that you have been known by:</b>
<b>Date of Birth:</b>
<b>Address:</b>
<b>Postcode:</b>
<b>Tel:</b> _____ <b>mobile:</b> _____
<b>How long have you lived at this address?</b>
<b>If less than 12 months please give your previous address:</b>
<b>How long did you live here?</b>

**DECLARATION**

❖ I confirm that I have submitted a Self-Declaration health form; that I understand that an enhanced Disclosure Check will be required if I am the successful applicant; and that the information in this form is accurate and truthful

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Training and Qualifications** - Enter below details of any qualifications relevant to the post applied for and/ or any relevant training courses attended (Continue on a separate sheet if necessary)

Date(s)	Title of Qualification/Training	Subjects studied	Length of Course	Name of Organisation

**Employment History** - Give details of your current or most recent employment and work backwards until you left full time education. (Continue on a separate sheet if necessary)

Dates of employment	Name and address of Employer	Job Title and Main Duties of Post	Reason for Leaving

**Experience** – Give details of any previous experience you have working with food. (Continue on a separate sheet if necessary)

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## **Personal Statement**

Why are you interested in this post?

## **Health**

How many days absence have you had from work during the last 2 years?

Do you have any physical or mental health condition that could affect your ability to work with Food or children? **YES / NO if YES please give details below.**

**References** – Please provide details of TWO people for reference purpose. Referees must NOT be related to you. One should be your current or most recent employer or someone who knows you well (not family).

***Referees will only be contacted if you are being short listed for interview***

Name	Name
Address	Address
Telephone Number	Telephone number
In what capacity do you know this person?	In what capacity do you know this person?
If you are short listed for interview, can we approach this person prior to you being interviewed?	If you are short listed for interview, can we approach this person prior to you being interviewed?

***Remember to sign the Declaration on the front page***