**Employment Application Form**

Please complete all sections of this form. References will only be obtained should your application be successful however please include details of referees in the section marked references. **Please email application completed form and CV to** **louise@littlebugs.co.uk****.** Due to the Covid-19 pandemic initial interviews will be held via zoom video call. Selected candidates will then be invited onto site for a second interview. When submitting your completed application please save and title your document as follows. Outdoor EYO FF (first name then Surname)

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| **Post** |
| Post applied for: **ASC Play Worker** |
| Please tick the relevant box below to indicate which hours you would like to be considered for: |
| Full time |  | Part time | **X** | Both |  |
| If part time, please indicate preferred hours:**19 Hours Monday to Friday (2.30pm to 6.15pm) TERM TIME** |
| Where did you see this post advertised? |

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| **Personal Details** |
| First name:  | Surname:  |
| Place of residence:  |
| Contact telephone number:  |
| Email:  |

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| **Education, Qualifications and Training** |
| **Secondary Education** |
| **Subject/Module** | **Level (e.g. Standard, Int 2, Higher, SVQ)** | **Category of award (e.g. 1,2,3 A,B,C)** |
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| **University/Further Education** |
| **Name of institution**  | **Courses/Subjects studied** | **Qualification obtained**  | **Date Obtained**  |
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| **Specialised Training e.g., National Governing Body Awards/First Aid/CPD** |
| **Training organisation** | **Course title/Award** | **Date completed** |
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| **Membership of Professional Bodies e.g., SSSC/GTCS/PVG** |
| **Name of institution/body** | **Class/type of membership** | **Date joined** |
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| Employment Details |
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| Current/Most Recent Employment |
| Employer’s name: |  |
| Employer’s address: |
| Post held: |  | Start date: |  |
| Leaving date or notice required:  |  |  |  |  |
|  |  |  |  |  |  |
| Reason for leaving, if applicable: |  |  |
| Details of duties and responsibilities: |
| Employment History (List in date order, include extra pages if needed) |
| **Employer 1** |
| Employer’s name: |  |
| Employer’s address: |
| Post held: |  |
| Dates of employment: | From: |  | To: |  |
| Reason for leaving: |  |
| Details of duties and responsibilities: |
| **Employer 2** |
| Employer’s name: |  |
| Employer’s address: |
| Post held: |  |
| Dates of employment: | From: |  | To: |  |
| Reason for leaving: |  |
| Details of duties and responsibilities: |

| Information in Support of Your Application |
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| Please tell us in detail why you have applied for this post and how you meet the personal specification.  |
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| Please tell us about your personal ethos when it comes to outdoor learning, detailing your approach to working within an **outdoor** After School Club. |
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| Please tell us about any past experiences or personal strengths you feel would help you in this role and how you would contribute to the Little Bugs at Fordell Firs team.  |
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| Please provide any further information you would like to tell us that you feel would make you stand out as an excellent practitioner. (max 500 words)  |
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| **Driving Licence** |
| Do you hold a current UK driving licence? YES / NODoes your license have category D1? YES / NODoes your license have penalty point endorsements? YES / NOIf YES, please state how many: |

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| **Employee Code of Conduct** |
| Please provide the name of any person with whom you have a relationship or close friendship who is currently employed by Little Bugs Ltd.  |
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| **Additional Supports**  |
| Do you require the provision of any support aids in order to attend interview via Video call YES / NOIf YES only: Please give details: |

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| **Rehabilitation of Offenders Act 1974** |
| Have you ever been convicted of any criminal offences which are not yet spent under the Rehabilitation of Offenders Act 1974?YES / NOIf YES, please provide details in a sealed envelope marked “Strictly Confidential”. |

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| **Declaration** |
| **IMPORTANT – READ CAREFULLY BEFORE SIGNING THE DECLARATION**I certify that all statements given above by me on this form are true and correct to the best of my knowledge. I realise that if I am employed and it is found that such information is false or that I have withheld information, I am liable to dismissal without notice. In accordance with the Data Protection Act 2018 I hereby consent to Little Bugs Ltd retaining and processing, as required, all information provided by myself in respect of this application for employment and any subsequent employment within Little Bugs Ltd, for the purposes of statutory, statistical and contractual obligations. I understand that, if necessary, Little Bugs Ltd may disclose this information to other recognised contractors for the purposes of recruitment.I agree to allow Little Bugs Ltd to store my details for no more than 1 year should my application be unsuccessful, otherwise for the duration of my employment with Little Bugs Ltd.  |
| Signature:(If successfully chosen for interview you will be required to bring a signed copy of the application with you.)Print name:Date: |

**Please now complete the references section below.**

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| **Referees** |
| Please provide the names of two **professional** referees, at least one of whom should know you in a work capacity. One of your references must be **your most recent employer**. |
| **Referee 1** |
| Name:Address:Postcode:Daytime telephone number:Email:Occupation:We may wish contact them prior to interview. Do you give us permission to do this?YES / NO |
| Post Title:I provide my consent to Little Bugs ltd approaching the above-named person to obtain an employment reference.Print name ………………………………………………………………….. |
| **Referee 2** |
| Name:Address:Postcode:Daytime telephone number:Email:Occupation:We may wish to contact them prior to interview. Do you give us permission to do this?YES / NO |
| Post Title:I provide my consent to Little Bugs Ltd approaching the above-named person to obtain an employment reference.Print name ………………………………………………………………….. |