

## **REGISTRATION FOR PERMANENT (NURSERIES)**

Full Name									
	<u> </u>								_
Address									
						Post C	ode		
Date of Birth			Email Addre						
DII (II			Addit	233					
Home No					М	obile No			
Driver		Public		Areas	VOLL				
Car		Transport		can wo					
DBS No				Updat	e No				
Desired Role						Salary /			
Role						Benefits			
F/T: P/T: Te	rm Time					Notice Pe	eriod		
Date	Sc	chool/ Colleg	e/ Univers	sitv				Qualification	
		, 0	,					, ,	
<b>F</b>									
Do you have Medical / Al Conditions include Days Absen last 2 years	lergies								



## **EMPLOYMENT HISTORY**

Current	
Employer/	
Address	
Job Role:	
Dates /	
Salary	
Setting Size	
/ Room:	
What you	
do?	
Previous	
Employer/	
Address	
Job Role:	
Dates /	
Salary	
Setting Size	
/Room:	
What you	
do?	
Previous	
Employer/	
Address	
Job Role:	
Dates /	
Salary	
Setting Size	
/Room:	
What you	
do?	
Tell us about	
yourself:	
Your	
Strengths/	
Weaknesses:	
Your Goals	
Achievements	
/ Aspirations	



## **REFERENCES**

Current Emplo	yer						
Address							
Name / Position	n	Pho	ne No				
Email		Con	Contact before				
		Inte	rview				
Previous Emplo	oyer						
Address							
Name / Position	n	Pho	ne No				
Email		Con	tact before				
		Inte	rview				
		DECLARATIV	2015				
Harris	l	DECLARATIO	<u>JNS</u>				
Have you ever l through a disci							
a result of your	. ,						
Childcare Pract							
Safeguarding P							
Please give full							
It is important all the information you have supplied is accurate. If you give any information which may be found to be false, misleading or you deliberately omit any relevant information this may lead to your application being rejected, or if you have been appointed, this may lead to your dismissal. You may not be allowed to continue with your registration with us if you fail to produce/hold the original documents. All information will be kept in accordance with the Data Protection Act. This registration form together with your documents will be retained on our electronic database and from time to time we will contact you with vacancies that are in your areas.  Laccept: References will be taken and may be passed on to any potential Employers. The checking of information collected with third parties or with other information held by JEM Childcare.  Laccept: Information may be passed to certain Third Parties to prevent or detect crime to protect public funds or in any other way permitted or required by law.  Laccept: A passport or other document issued by the Home Office which has an endorsement stating that the holder has a current right of residence in the United Kingdom as the family member or a national from a European Economic Area country or Switzerland who is resident in the United Kingdom.							
and that my info create my Candi Childcare Qualif	ormation wi idate Profile		nnel file: My ntation attac	rm that the information herein is true, CV and Registration form will be used to hed includes electronic copies of my			
Signature							
Date							
i							