Cranley Nursery

cranleynursery.co.uk enquries@cranleynursery.co.uk

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Post applied for				
Where did you see the vacanc	y advertised?			
Name				
Address				
		Postcode		
Home number		Mobile number		
Email address				
What hours can you work? Fu	ll time 8am - 6pm 🗖	Part time 🔲 🏻 Ple	ease state hours available	
Do you have any children No	Yes How m	any do you have	What are their ages	
PVG/Disclosure number		SSSC registration	on number	
Career history Please give details of your prev	rious employment starting v	vith the most recent		
Employer name				
Employer address				
		Postcode		
Job title				
Salary				
Summarise the nature of your	job including responsibiliti	es and achievements		
Date joined company	Date left co	mpany		
Reason for leaving				



Buckstone

226 Braid Road Edinburgh, EH10 6NZ (t) 0131 445 2227

Craiglockhart

38 Craiglockhart Avenue Edinburgh, EH14 1LT (t) 0131 444 0880

Lanark Road

438 Lanark Road Edinburgh, EH13 0NJ (t) 0131 441 2200

employee application form

Career history continued

Employer name Employer address		
Employer address	Postcode	
Job title	Salary	
title	Saidiy	
Summarise the nature of your job i	ncluding responsibilities and achievements	
Date joined company	Date left company	
Reason for leaving		
Employer name		• • • •
Employer address		
	Postcode	
Job title Summarise the nature of your job i	Salary ncluding responsibilities and achievements	
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Summarise the nature of your job in the policy of the poli	Date left company Postcode Salary	• • •
Date joined company Reason for leaving Employer name Employer address Job title Summarise the nature of your job i	Postcode Salary ncluding responsibilities and achievements	• • •

Childcare qualifications

Please detail any qualifications you have which relate to Childcare and/or Early Years education

Qualification	Where gained	Date	Grade

Relevant experience

What experience do you have caring for or working with young people? (There is no need to repeat information in career history section). Other qualifications including school

Qualification	Where gained	Date	Grade

Health

children?

Health				
Please state how many days off work you have had due to sickness in the last 12 months				
Have you seen a doctor in the last 2 years? No ☐ Yes ☐ If yes please state the reason				
Have you had an operation or accident in the past 5 years? No ☐ Yes ☐ If yes please state the reason				
Have you ever been retired or had a contract terminated with a past employer due to ill health? No 🗆 Yes 🗀 If yes please state the reason				
Are there any reasons why you think your present state of health may affect the way you look after or work with				

employee application form

Personal Statement

Rate per hour

Hours per week

	e write about your experience and knowledge, why you would like to work at el you could bring to the Company.
Referees	
I submit two referees (who can o most recent employer	comment on my suitability to work with young children) one of which must be my
Name	
Address	
	Postcode
Telephone number	
Name	
Address	
	Postcode
Telephone number	
Declaration	
I acknowledge that any job offe	r will be subject to satisfactory medical clearance. I am currently in good health
	d any caution, warning, been reprimanded for any offences or been convicted of any
	n this application is correct and understand that if given the post any misleading ons may lead to the offer being retracted.
Signed	Date
For Office Use	
Shortlist/decline with reason	
Date of interview	
Qualified/training in place	

Start date