



FCJ Primary School
Deloraine Road
St. Saviour
Jersey
JE2 7XB

Tel: 01534 723063

Fax: 01534 880353

admin@fcj.sch.je www.fcj.sch.je

APPLICATION FORM – Playworker

1. PERSONAL DETAILS

Application for the position of.....
Full details of present post.....
At.....
Address.....
.....Notice required.....


Surname..... Title.....
Christian/First Names.....
Marital Status..... Religious Denomination..... Date of Birth...../...../.....
Address
.....
.....
Home Telephone Number:..... Mobile Telephone Number:.....
Email Address.....
Work Telephone Number:.....
Social Security Number.....

PLEASE RETURN THIS FORM TO MS. D LENZI, HEADTEACHER, MARKED 'PRIVATE AND CONFIDENTIAL'


CLOSING DATE FOR APPLICATIONS.....

2. POST-11 EDUCATION AND TRAINING

Please give information about education received in Jersey and the UK or abroad, qualifications obtained including degrees with class and division, in chronological order starting from the most recent.


| Establishment Attended | Full or Part-time | Qualifications | Dates attended From | To |
|---|-------------------|----------------|------------------------|----|
|  | | | | |

Please list recent courses and professional development in which you have been involved in the past 3 years and which you consider relevant to this post (stating length of courses). Please continue on a separate sheet if necessary.

| Course Title | Brief Description | Duration |
|---|-------------------|----------|
|  | | |

3. EMPLOYMENT HISTORY

Please give details in chronological order, starting with the most recent.

| Name of Employer | Post Held | Responsibilities | Dates | |
|---|-----------|------------------|-------|----|
| | | | From | To |
|  | | | | |

DETAILS of all other employment and unpaid experience after the age of 16, in chronological order, most recent first (e.g. family duties, voluntary work etc.) which you wish to be taken into consideration:

If there are any periods of time that are not accounted for by this form and upon which you wish to comment, please do so.

4. ADVERTISEMENT

Please state where you learned of this vacancy.

5. MEDICAL HISTORY

How many days sickness have you had in the last 2 years? (Exclude maternity leave)

Are you aware of any disability, or on-going medical condition or treatment that we should be aware of?

YES ☐

NO ☐

Please give brief details of your disability and any reasonable adjustments you anticipate we would need to make.

6. REFERENCES

Please nominate up to three referees. If you are in employment, one referee should be your present employer. Please tick the boxes **only** if you **do not** want the referee(s) to be contacted prior to interview.

Name.....Designation.....☐

Address.....

.....

Telephone..... Email.....

Name.....Designation.....☐

Address.....

.....

Telephone..... Email.....

Name.....Designation.....☐

Address.....

.....

Telephone..... Email.....

We reserve the right to take up references with any previous employer.

Notes: (i) referees will be contacted before interviews unless otherwise requested.

(ii) If any of your referees knew you by another name, please write that name
here:.....

Are you related to any member of the staff/Governing Body? YES /NO

If so, please give their name:.....

7. DISCLOSURE OF CRIMINAL AND CHILD PROTECTION MATTERS

The Governors are obliged by law to operate a checking procedure for employees who have substantial access to children and young people.

CONVICTIONS

If you have no convictions, simply enter "NIL". If you have been convicted of a criminal offence, the details must be listed below, together with any pending criminal convictions. Please also list any pending criminal actions or court hearing against you.

.....
.....

CRIMINAL RECORDS BUREAU

In the event of a successful application a Disclosure will be sought from the Criminal Records Bureau in relation to criminal and child protection matters. A conviction will not necessarily be a bar to obtaining employment.

8. RESIDENTIAL QUALIFICATIONS

Do you possess residential status under Jersey Housing Law? YES / NO

How long have you been continuously resident in the Island immediately prior to this application?

9. DATA PROTECTION

I hereby give my consent for personal information (including recruitment monitoring data) provided as part of this application to be held on computer or other relevant filing systems and to be shared with other accredited organisations or agencies in accordance with the Data Protection Act 1988.

Signature:

10. DECLARATION

If you know that any of the information you have given on this application form is false or if you have knowingly omitted or concealed any relevant fact about your eligibility for employment then your name will be withdrawn from the list of candidates.

If such a discovery is made after you have been appointed then you will be liable to be dismissed.

I hereby certify that all the information given by me on this form is correct to the best of my knowledge, that all the questions relating to me have been accurately and fully answered and that I possess all the qualifications which I claim to hold.

Signature..... Date.....

(The post will be subject to the terms and conditions of the FCJ Primary School contract)

NOTES TO APPLICANTS

1. Before signing this form, please ensure that every section has been completed.
2. The form should be returned as instructed in the details of the post.
3. Applicants may attach a separate statement in support.
4. Applications will only be acknowledged if a stamped addressed envelope is enclosed.
5. Applicants are reminded that this is an application for a post in a private Catholic School where the Governors are the employers and that the post will be subject to the terms of the FCJ Primary School Contract.
6. You must declare **all** convictions that you have, including motoring offences and all convictions that have become "spent".

