



APPLICATION FOR EMPLOYMENT

Please complete the form in blank ink.

Application for the post of	
Current / Previous Annual Salary £	Part Time <input type="checkbox"/> Full Time <input type="checkbox"/>
Availability: Immediately <input type="checkbox"/> or From: Date / /	

1. Personal Details

Surname	Title:	
Forename(s)	Date of Birth:	
Home address:		
Postcode:		
Languages spoken and Level:		
Tel. Home:	(Work):	
Tel. Mobile:	e-mail address:	
Montessori training centre:		
Country/City:		
National Insurance number:		
Do you hold a British/EU Passport? If not, Do you have the right to work anywhere in the UK? or Do you require a Work Permit?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	No <input type="checkbox"/>

2. Referees

These should be persons of appropriate standing with direct knowledge of your professional work and should include your present employer. Please note that we will contact the above referees if you are short listed for this post and seek reference before interview.

Name:	Name:
Job Title:	Job Title:
Name and address:	Name and address:
Postcode:	Postcode:
Email:	Email:
Telephone number:	Telephone number:

*Cambridge Montessori does not discriminate on grounds of age. Date of birth and dates are requested in line with the recommendations of Safeguarding Children. Safer Recruitment and Selection in Education Settings, DfE 1568-2005, July 2005

3. Education and Qualifications

Start with your Secondary Education and then include FE/Higher and initial teacher training

Secondary Schools, Colleges and Universities attended	Dates		Details of examinations passed and qualifications obtained
	From	To	

4. Continuing Education/In-Service Training

Please give details of all courses (including the month/year) attended of at least one day over the last two years. Continue on a separate sheet if required:

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5. To be completed by AMI Montessori Teachers

Experience as a Montessori Directress leading a classroom? Years Months Classroom size Assistants in the classroom
Main Language: <input type="text"/>
AMI Montessori Approved Training Centre:
Address: Country: Post Code:
AMI Director of Training:
Training Period Dates: From: __/__/____ to: __/__/____
Language of submitted work: English <input type="checkbox"/> Other Language:
Examination Dates: City:
Examiners Names: 1) 2)
AMI Diploma(s) achieved: 0-3 <input type="checkbox"/> 3-6 <input type="checkbox"/> 6-12 <input type="checkbox"/>
Any Conditions before acquiring the AMI Diploma: e.g. (Extra supervised practise, re-take exams)

Please print and complete this page again if you hold more than one AMI Montessori Diploma.

6. Present or most recent employment

Job Title:	
Date Appointed to Post / / Annual/Hourly Salary £	Contracted Hours:
Term Time only Yes <input type="checkbox"/> No <input type="checkbox"/>	Notice Required:
Name of School/Nursery/Employer:	
Type of Nursery/School (e.g. Preschool, Term time, Primary, Day care):	
Address:	
Post Code:	
Telephone number:	LEA/OFSTED Registration number:
Key Responsibilities: <i>Continue on a separate sheet if required</i>	

7. Previous Early Years Employment

Post	School/Nursery	Full/Part time	Salary Scale	Age Range	Key Responsibilities	Dates	
						From	To

Continue on a separate sheet if required

8. Other Employment

Please give details:

How many days have you been absent from work through sickness in the last twelve months? And Why?

Continue on a separate sheet if required

Are you a car owner Yes No

Do you hold a current licence Yes No

Do you have any connections to the School/Nursery Yes No
e.g. personal, financial, friends

If so please provide details

9. Supporting statement

Please give details of your experience, skills, abilities and any other additional information which you think would be useful in this job. You should cover the points listed in the Person Specification and include any additional information, e.g. languages spoken. Please complete on a separate page.

10. Other relevant information

May include any special needs or a disability that may require us to make a 'reasonable adjustment'.

Rehabilitation of Offenders Act 1974

The position for which you are applying involves contact with children and is exempt from the Rehabilitation of Offenders Act 1974 and all subsequent amendments (England and Wales). For these positions you are not entitled to withhold information about police cautions, reprimands, warnings, 'bind-overs', or any criminal convictions including any that would otherwise be considered 'spent' under the Act.

11. HAVE YOU EVER BEEN CONVICTED OF ANY OFFENCE OR 'BOUND-OVER' OR GIVEN A CAUTION, REPRIMAND OR WARNING? YES NO

**If yes, please give details on a separate sheet and attach it to this form in a sealed envelope.
I hereby declare that the information provided is correct**

Signature of applicant _____

Date ___/___/_____

Please return this Application Form to:

Cambridge Montessori, 73a Tenison Road, Cambridge, CB1 2DG

or by email: pamela@montessoricambridge.co.uk

12. Recruitment Monitoring

We are committed to providing equality of opportunity to all applicants. We operate an equal opportunities policy, which seeks to ensure that unfair discrimination does not take place during recruitment. To help us to monitor the effectiveness of the policy we would greatly appreciate your assistance. Please provide the following information below.

Please note: This information is confidential and does not form part of your application. It will be kept separate from your application form and will not be taken into account when making any decisions about the appointment.

Surname:	Initials:
Job Title:	Location Cambridge? Yes <input type="checkbox"/> No <input type="checkbox"/>
Job reference number:	
Are you:	Male <input type="checkbox"/> Female <input type="checkbox"/>
Would you describe yourself as a lone parent:	Yes <input type="checkbox"/> No <input type="checkbox"/>
What is your age?	
Do you consider yourself to be disabled?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you applying as a jobsharer?	Yes <input type="checkbox"/> No <input type="checkbox"/>
To which of these ethnic groups do you consider you belong? (NB This is not a question about your nationality or place of birth, but your ethnic origins)	
White British <input type="checkbox"/>	White Irish <input type="checkbox"/> White (Other) <input type="checkbox"/>
Mixed race <input type="checkbox"/>	Indian <input type="checkbox"/> Pakistani <input type="checkbox"/>
Bangladeshi <input type="checkbox"/>	Other Asian (non Chinese) <input type="checkbox"/>
Black Caribbean <input type="checkbox"/>	Black African <input type="checkbox"/> Black (Others) <input type="checkbox"/>
Chinese <input type="checkbox"/>	Latino American <input type="checkbox"/>
Any other group (please state)	
Where did you see the job advertised?	