

**SHANKILL SURE START APPLICATION FORM**

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| **Ref No** | **SSS/Early Learning Coordinator** |
| **Application Number** |  |
| **Date Received** |  |

**PLEASE NOTE**

**PLEASE COMPLETE IN BLACK INK OR TYPESCRIPT**

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| **Post Applied For: Early Learning Coordinator – 30 hrs per week term time (39 week contract)** |
| **Surname:**  | **Forename/s:** | **Title:** |
| **Address for correspondence:**  |
| **National Insurance Number:** |  |  |  |  |  | **Please give details of any other surname which you have been know by:** |
| **Post Code:** | **Email Address:** |
| **Telephone (Home):** | **Mobile:** | **Business:** |
| **In order to assess your eligibility to work in the UK we require some details in regard to your nationality.****Are you a citizen of an EU Country? YES/NO Country of Birth:**  |
| **We are committed to promoting the inclusion in employment of people with a disability. If you are a registered disabled person and require any special arrangement to enable you to attend for interview please state below:****Do you have a disability? YES/NO****If yes please provide details:**  |
| **Have you ever been convicted of a criminal offence? YES/NO****If yes please provide details:** |
| **Do you hold a current full driving licence? YES/NO** |

 **(A) PERSONAL DETAILS**

**(B) Your Current Employer**

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| **Name and Address of your current employer:**  |
| **Present Post:** | **Date of Appointment:** |
| **Salary:** | **Other benefits:** | **Notice period:** |
| **Summary of Duties:** |
| **How many days sickness absence have you had in the last 2 years? Number of Days:**  |

**(C) Your Previous Employers**

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| **Name of Employer** | **Job Title** | **From** | **To** |
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**(D) School Education**

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| **From** | **To** | **Subject** | **Examination Taken** | **Result** | **Date Awarded** |
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**(E) Further Education**

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| **From** | **To** | **Name of** **College/University****Course Provider** | **Examination Taken** | **Result** | **Date Awarded** |
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**(F) Professional Qualifications**

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| **Title of Qualification** | **Date of Award** |
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**(G) Current membership of Professional Bodies:**

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| **Title of Professional Body** | **Type/Grade of Membership** | **Date of Attainment** |
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**(H) References**

***Please give the names and address of two persons who would be willing to provide a reference. One must be your current/last employer, the other preferably a past employer. Both must be able to comment on your ability to carry out the duties of the post for which you have applied. Neither referee should be related to you*.**

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| **Name:** |
| **Address:** |
| **Post Code:** |
| **Tel No:** | **Email Address:** |
| **Name of Business Place:** |
| **What is the nature of your relationship with this person (eg manager etc.)?** |
|  |
| **Name:** |
| **Address:** |
| **Post Code:** |
| **Tel No:** | **Email Address:** |
| **Name of Business Place:** |
| **What is the nature of your relationship with this person (eg manager etc.)?** |

**This section has been devised to assist in the shortlisting process and relates directly to the criteria outlined in the personnel specification. Failure to provide sufficient information/detail in response to the direct questions will in effect mean that your application may not be shortlisted, due to the lack of information.**

**Essential Criteria:**

1. **Do you hold:**
* **QCF Level 5 Diploma in Leadership for CCLD Management Pathway or equivalent?**
* **at least two years’ paid experience in employment working with children aged 0-3 years, gained within the last four years**
* **a minimum of 2 years’ experience of managing staff in an early years setting**

**Yes/No**

**If ‘y*es*’, please give details**: *(eg year gained, awarding body)*

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**2 Do you have evidence to demonstrate a minimum of 2 years’ paid experience of;**

**(i) Working with children aged 0-3 years, gained within the last four years? Yes/No**

 **If ‘y*es*’, please give details:**

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**Do you have evidence to demonstrate a minimum of 2 years’ experience of managing staff in an early years setting?**

**Yes/No**

**Is ‘*yes*’ please give details:**

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**Knowledge:**

**3 Do you have knowledge and understanding of current issues and legislation in childcare? Yes/No**

**If ‘*yes*’, please give details:**

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**4 Do you have knowledge and understanding of the importance of the role of parents and carers in children’s development? Yes/No**

**If ‘*yes*’, please give details:**

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**5 Do you have knowledge and understanding of the importance of quality play for children’s development? Yes/No**

**If ‘*yes*’, please give details:**

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**6 Do you have knowledge of Minimum Standards for Childminding and Daycare for children under 12? Yes/No**

**If ‘*yes*’, please give details:**

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**7 Do you hold a current UK driving licence and have full access to a car to enable the duties of the post to be completed?**

 **Yes/No**

**Desirable Criteria:**

**Please indicate if you have evidence to demonstrate the following:**

* **BA Hons Degree in Early Childhood Studies**  **Yes/No**

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* **Certificate in Supervisory Management** **Yes/No**

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* **Completed Pf2Y training: Yes/No**

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**9** **Please give any other details which your feel may be relevant to this position** (*continue on a separate page, if required)*

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**10** **I give permission for an Access NI and Social Services check to be made and I am aware that any spent**

**convictions will be disclosed Yes/No**

**DECLARATION:**

**I understand that this information may be verified as part of my application and that any resulting employment may be withdrawn on the ground of its inaccuracy.**

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Closing date for receipt of applications is 12 noon, Friday 13th September 2024**

Application should be returned to: alessie.admin@earlyyears.org.uk

 FAO: Stephanie McConnell

 Shankill Sure Start

 Alessie Centre

 60 Shankill Road

 BELFAST

BT13 2BB

SHANKILL SURE START

MONITORING INFORMATION

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| Monitoring Reference Number SHANKILL SURE START – EARLY LEARNING COORDINATOR – 30 HRS PER WEEK TERM TIME (39 WEEK CONTRACT) **Application No:** |

FOR MONITORING PUROPOSES ONLY

Shankill Sure Start monitors the application it receives for jobs in order to ensure that its recruitment practices promote equality of opportunity.

This information will be treated in the strictest confidence and protected from misuse, and will not form part of your application. It will be used only for the purpose of monitoring our equal opportunity employment policy.

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| **Please indicate your religion or the religion to which you would be perceived to belong by ticking the appropriate box below:**I am a member of the Protestant Community I am a member of the Roman Catholic Community I am a member of neither Protestant nor the Roman Catholic Community |
| **Please indicate your gender by ticking the appropriate box below:**Male Female |
| **Please indicate your marital status by ticking the appropriate box below:**MarriedSingleDivorced/SeparatedWidowedOther  |
| *Under the Disability Discrimination Act 1995 a person is considered to have a disability if he/she has a physical or mental impairment which has a substantial and long-term adverse effect on his/her ability to carry out normal day to day activities***Do you consider that you meet this definition of disability?**YesNoIf **‘YES’** please state the nature of, or effects of your disability: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Please describe your ethnic origin by ticking the appropriate box below:**WhiteIrish TravellerBlack-CaribbeanBlack-AfricanBlack Other (please specify)Bangladeshi Other (please specify)IndianPakistaniChinese |