



Camphill School Aberdeen

FOR CHILDREN AND YOUNG PEOPLE IN NEED OF SPECIAL CARE
FOUNDED BY DR KARL KÖNIG

Co-worker application pack

Please send original documents only.

This pack contains the following forms:

1. **Full Application Form**
Complete and return the Application Form as soon as possible.
2. Attach a recent **passport photograph**.
3. **Rehabilitation of Offenders Act Form**
Complete and return with your Application.
4. **Hepatitis B Declaration**
Please sign and date this form and remember to tell us whether you are vaccinated, will start, or have no wish to do so.

In addition you will need to send the following documents – these can be sent at a later date:

5. **Medical Record Form**
Take this form to your doctor. He/she should share any concerns that may influence your ability to work, such as: drug addiction, psychological illness, back problems, allergies, eczema, asthma, epilepsy or any other relevant medical information.
6. **Overseas Nationals:** Contact your Local Authority and request an up-to-date **Criminal Record Check at Enhanced Level as you will work with vulnerable children**. Please send the original document. Any information will be kept confidential.

UK Applicants: To work in the care sector in Scotland you are required to be a member of the **Protecting Vulnerable Groups Scheme (PVG Scheme)**. **If you already hold membership we will apply for a Scheme Membership Update Statement; if not, you need to join the scheme. Please indicate on the co-worker application if you apply as a new member or if we apply for an update statement.** We will forward the appropriate Disclosure Scotland Application as required. All information will be kept confidential.

7. **School-leaving Certificate** if available.

Application to be sent to:

The Co-worker Recruitment Group
Camphill School Aberdeen
Murtle House, Bielside
Aberdeen AB15 9EP
Scotland

If you have any questions, please contact:

Betty Porter
Tel: 0044 (0)1224 866162
Fax: 0044 (0)1224 868420
E-mail: b.porter@crss.org.uk

CO-WORKER APPLICATION FORM

Camphill School Aberdeen

Page 1

FOR CHILDREN AND YOUNG PEOPLE IN NEED OF SPECIAL CARE
FOUNDED BY DR KARL KÖNIG

Please send your application to:

The Co-worker Recruitment Group
Camphill School Aberdeen
Murtle House, Bielside
Aberdeen AB15 9EP
Scotland
E-mail: b.porter@crss.org.uk

PHOTO

Please attach a recent
passport sized
photograph

PERSONAL DETAILS

Mr/Mrs/Miss/Ms	Surname:	First Name:
Gender	*Male / *Female	
Date of Birth	Day Month Year	Age:
Nationality		
Current Occupation		
Marital Status	Single <input type="checkbox"/> Married <input type="checkbox"/> Partner <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/>	
Do you have any Children or Dependants	*No / *Yes	Please give details:
Street Address	Home Address	Current Contact Address if living away from home:
Town & Zip Code		
Country		
Home Telephone Number		
E-Mail Address		
Identity No. or National Insurance No:		
UK Applicants Only: Scottish Social Services No:		
Date of Registration:		
UK Applicants Only: Are you a member of Disclosure Scotland's PVG Scheme?		Yes/No
If you answered 'yes' please supply Scheme Membership Number:		
Date Disclosure Issued:		

Preference will be given to those who commit themselves for One School Year. Please choose an entry date from the list below:

Length of Stay (in months)

Entry Date (see website for entry date)

COURSES: *Please select as applicable:

***One Year Foundation Course**

***Degree - BA Social Pedagogy**

NAME TWO REFEREES

Please give details of two persons that have **known you for two years**. We will write to your referees. Please name current or most recent employers/teachers/tutors/community leaders/church or youth group leaders.

Do not send any letters of reference from those you name below.

Do not name family members or personal friends as referees.

Enter Name and Address clearly:

e.g. in BLOCK CAPITALS (druck) RANHILD SCHMIDT **not in *joined writing*** (schreibschrift)

	1. Mr/Ms	2. Mr/Ms
NAME:		
Street Address:	_____	_____
Zip Code & Town	_____	_____
Country	_____	_____
Telephone No: *Home or *Work		Telephone No: *Home or *Work
Fax No: *Home or *Work		Fax No: *Home or *Work
E-mail Address:		
Profession:		
Relationship:		

EMPLOYMENT - Current

Employer's Name and Address	Dates (From – To)	Position Held	Date of Leaving Employment
Notice Required			

EMPLOYMENT – Previous (most recent first)

Employer's Name and Address	Dates (From – To)	Position Held	Date of Leaving Employment

EDUCATION – Schools attended

Dates (From – To)	Name and Address of School	Certificates Obtained Please include Grade/Pass Mark in English

EDUCATION – Further Education**Page 4**

Dates (From – To)	Name and Address of University/College	Full or Part Time	Qualification Gained (Enclose copy of award certificate)

Other Training or Short Courses (e.g. First Aid, Mountain Rescue, Horse Riding, Computer Skills)

Dates (From – To)	Name Organising Body	Subjects Studied

Personal Interests

Please give any interests or hobbies that you enjoy that you think will contribute to our work with children.

NEXT OF KIN DETAILS

(What's this? Please give the details of the person we should contact in the event of an emergency.)

Name of Next of Kin	
Street Address Town Country Postcode/PLZ/ZIP Code	
Telephone No. Fax No.	
Relationship	

How did you hear about Camphill?

*From a Friend Name:	From the Internet CSA Website Link Please give details:	*From a Book Name of Book:
	Other – please detail:	

European co-workers with sufficient experience and UK equivalent qualifications can be sponsored by Camphill School to undertake the three year BA in Social Pedagogy at Robert Gordon University, Aberdeen. European students are required to show evidence of their qualifications when arguing for equivalence and will need to have passed an IELTS test at 5, 5.

The course will provide a holistic focus on the individual, family and community and will explore emotional, psychological, physical and spiritual development across the lifespan. Emphasis will be placed upon group care and community based practice with a critical and reflective approach. In the final year of the course there will be the opportunity to focus on working with children and young people or with adults. The BA Social Pedagogy course content will be mapped to National Occupational Standards with the intention of enabling registration with regulatory bodies such as SSSC in Scotland.

Please contact office@crss.org.uk for further details.

DECLARATION

I have read and understood the co-worker information and declare that the information I have given is correct.

I hereby give my consent to Camphill School Aberdeen to process this application (including all additional forms). I also agree to my application details being stored in any form including electronic media storage. My rights are protected by the Data Protection Act 1998 and I have the right to access my personal information.

Signed: _____ **Date of Application:** _____

REASONS FOR APPLICATION

Please write briefly why you want to work and live in Camphill School Aberdeen and care for children with special needs. Give any other information you consider relevant.

How Well Do You Communicate In the English Language?

*Very Well	*Well	*Basic Knowledge Only	*Poor
------------	-------	-----------------------	-------

How long have you studied the English language? _____ *School or *Higher Education Level?

CO-WORKER - Medical Record Form

Camphill School Aberdeen

FOR CHILDREN AND YOUNG PEOPLE IN NEED OF SPECIAL CARE
FOUNDED BY DR KARL KÖNIG

Application Ref. No:

1. This form can be sent separately and does not need to be attached to your application.
2. Your GP (family doctor) must complete this form.

All co-worker volunteers, helpers, etc., who come to participate in our programme are required to have a medical report submitted by their General Practitioner (GP) certifying their health and fitness for the work with children in need of special care. Depending on where you live, your GP may charge you for this service.

Please ask your GP to complete and sign this form. Your GP may use his own form as long as the required information is noted and the original declaration is forwarded to Camphill School Aberdeen prior to your arrival.

Information to General Practitioner

The examination could include:

- A general physical examination;
- Tuberculosis screening;
- Communicable diseases;
- History of drug abuse, psychological illnesses if any;
- Information on medical problems, epilepsy, allergies, back pain, etc., which may affect the applicant's performance or interfere with the health of the children with which he/she comes into contact.

The Camphill environment can be strenuous; there are no fixed hours of work. It is a 5-day a week programme, which requires great physical and emotional stamina. One-to-one work with children, some physically disabled and others with challenging behaviour, may make demands upon the co-worker which he or she has never had to deal with before. If you have any questions or concerns about the physical or emotional health of the applicant, or if there are any ongoing medical or psychological conditions, please explain below.

Thank you for your co-operation.

Name of Applicant: _____

Date of Birth: _____

Comments:

Would the applicant have any special need of treatment whilst here?

Name: Dr _____

Official Stamp:

Address: _____

Tel. No: _____

Date of Report: _____

CO-WORKER - Hepatitis B Declaration Form

Camphill School Aberdeen

FOR CHILDREN AND YOUNG PEOPLE IN NEED OF SPECIAL CARE
FOUNDED BY DR KARL KÖNIG

Application Ref. No:

1. This form can be sent separately and does not need to be attached to your application.
2. You should read this form carefully and choose the option which applies to you.
3. Don't forget to sign and date the form.

Hepatitis B is a liver infection, which can be transmitted through blood-to-blood contact and through sexual transmission but has also, on rare occasions, followed bites from infected persons. Also living closely with someone who is a carrier of Hepatitis B carries a risk of infection. As Hepatitis B can be a serious, life-threatening illness, people at risk are generally immunised against the infection. It has been recognised that staff and clients of residential accommodation for the mentally handicapped are a risk group for Hepatitis B and in most institutions staff are immunised.

You can protect yourself against hepatitis in three ways:

Take care if handling blood or bloodstained body fluids and use plastic gloves.

Passive immunisation can be offered with immunoglobulin after an incident - this is an injection and has to be given as soon as possible after exposure to infected blood or body fluid. It will protect a person for a limited period.

Active immunisation consists of 3 injections given at certain intervals. (Second injection after one month and the third after 6 months.) The process of injections can also be given at one month, 2 months, 3 months and 12 months. This is advised for co-workers who come to work in the School. After the third injection a blood test is required to test if a person has responded to the immunisation. It is known that between 5-15% of healthy individuals do not respond to the active immunisation.

Given the statistically higher prevalence of Hepatitis B in special schools, the official guidelines from the Department of Health recommend active immunisation to co-workers and offering it to pupils depending on the local circumstances.

New co-workers who come to Camphill School Aberdeen are strongly advised to take up the immunisation for Hepatitis B. It is advisable to contact your GP in order to start the course of injections as soon as possible and to ask your GP for the accelerated course.

If you do not wish to be immunised please return the attached reply slip.

Best wishes,

Dr S Geider

HEPATITIS B IMMUNISATION DECLARATION

Please delete as appropriate

*I do not wish to be immunised against Hepatitis B

*I would like immunisation against Hepatitis B

*I am already immunised against Hepatitis B

Print Name:

Signature: Date:

REHABILITATION OF OFFENDERS ACT 1974

Overseas Nationals must also forward a Criminal Record Check (original document), which you should request from your Local Police Authority.

PLEASE LIST ALL ADDRESSES YOU HAVE LIVED AT SINCE YOUR 16th BIRTHDAY. This is to include all travel undertaken in the last three (3) years where you lived away from your normal residence for more than three (3) months.

Although certain convictions can be considered as 'spent' after the elapse of a number of years, we ask that you disclose all convictions regardless of the nature of the conviction.

Complete all of the following information and sign and date this form at the bottom.

Title:		Surname:		Forenames:	
--------	--	----------	--	------------	--

Date of Birth:		Place of Birth:		Maiden Name: (where applicable)	
----------------	--	-----------------	--	------------------------------------	--

No.	Street	Town	Region/County	Postcode	Year from	Year to

*Continue overleaf if necessary

Please describe any/all offences in the box below. Include offence, date and sentence.

Write **"none"** if you have no convictions. **Do not leave this box empty.**

--

*Continue overleaf if necessary

Signed:	Date:
---------	-------