

Absolute ABA UK LTD Staff Application Form

Absolute ABA UK LTD is a safeguarding Organisation.

As part of our commitment to safeguarding children and young people, appointment to this post is subject to a satisfactory enhanced DBS check with a check against the barred lists for children and adults.

Section A: Personal Details

Title:

First Name(s):

Surname:

Have you used any other names previously?

☐ Yes ☐ No

If yes, please provide previous names and dates used:

Current Address:

Street:

Town/City:

Postcode:

How long have you lived at this address?

Previous Address (if less than 12 months at current address):

Street:

Town/City:

Postcode:

Duration at this address:

Contact Information:

Mobile:

Email:

Section B: Safeguarding

At Absolute ABA UK Ltd, we prioritise the safety and well-being of all children, young people, and vulnerable individuals.

What are your views on safeguarding and how do you see your role contributing to a safe environment?

(Please provide a detailed response)

Section C: Employment History

Current Role:

Organisation Name:

Address:

Position Held:

Dates of Employment:

Summary of Duties:

Reason for Leaving (if applicable):

Most Recent Role:

Organisation Name:

Address:

Position Held:

Dates of Employment:

Summary of Duties:

Reason for Leaving (if applicable):

Section D: Experience Working with Children and Young People

Please describe any **paid or voluntary roles** where you worked with children or young people. Include:

- Organisation
- Your role
- Age group(s) supported
- Duration
- Key responsibilities

What are your opinions on safeguarding?

Section E: Qualifications & Training

List all relevant **qualifications, certifications, or training** (e.g., ABA, safeguarding, first aid):

Qualification / Course Institution / Provider Date Completed

Personal Qualities

Briefly describe what makes you suitable for working with children and young people at Absolute ABA UK Ltd:

Section F: References

Provide details for **two referees**. At least one should have knowledge of your work with children or young people.

Referee 1

Name:

Organisation (if applicable):

Address:

Telephone:

Email:

Relationship to You:

Referee 2

Name:

Organisation (if applicable):

Address:

Telephone:

Email:

Relationship to You:

Section G: Declarations & Vetting

☐ I understand that this role requires an **enhanced DBS check**, including barred list checks for children and/or adults.

☐ I confirm I have completed and signed the **Safeguarding & Child Protection Self-Declaration Form**.

☐ I declare that the information provided in this application is true and complete.

Signature:

Full Name (printed):

Date:

Submit your completed application form and CV to:

✉ **Anja Gajic, BCBA**

📧 **Email: AnjaGajic-BCBA@AbsoluteABAUK.onmicrosoft.com,
absoluteabaukenquires@gmail.com**