**Specialist Practitioner Written Application Form**

The form must be completed, printed, with a written signature and posted to us at FAO: Katie Nelson Esendi Services (within Dyslexia Centre North West) Unit 17 Rough Hey Road, Grimsargh Preston PR2 5AR

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**Contact Details**

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| --- |
| Title: |
| Forenames: |
| Surname: |
| Maiden Name (if applicable): |
| Address: |
| Email: |
| Telephone: |

**Specialist Practitioner Details**

**\*This is an essential section which must be completed\***

**Please give information of what specialist services you are qualified to provide, e.g. Specialist Teacher/Counsellor**

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**How did you hear about us?**

How did you hear about Esendi Services ? (please be specific)

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**Employment & Qualifications:**

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| Present Position: |
| DCFS/DCS registration number for qualified teachers: |
| DOB: |
| Nationality: |
| Academic Qualifications (e.g. Degree, P.G.C.E, Dyslexia Qualification, Post Graduate Counselling qualification):  Please send copies of all professional qualifications along with this application or email to info@esendi.co.uk |
| Are you a member of any professional bodies relevant to your specialism? If so please provide details: |
| Do you currently have professional and public liability insurance?- please provide proof of this by including a copy of insurance certificate with this written application form or email to [info@esendi.co.uk](mailto:info@esendi.co.uk): |

******References**

Please supply the names, email addresses and postal addresses of two people who will be prepared to act as referees for you. Providing details of a third referee is helpful in case one of your first two does not reply. We prefer someone with whom you have had a formal relationship, (employer, college tutor, colleague, line manager, solicitor etc.).

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| **\*Referee 1\*** | | |
| Title Please provide this Referee's title | Name Please provide this Referee's first name | Surname Please provide this Referee's last name |
| Address:  Email Address:  Telephone: | | |
| **\*Referee 2\*** | | |
| Title Please provide this Referee's title | Name Please provide this Referee's first name | Surname Please provide this Referee's last name |
| Address:  Email Address:  Telephone: | | |
| **\*Referee 3\*** | | |
| Title Please provide this Referee's title | Name Please provide this Referee's first name | Surname Please provide this Referee's last name |
| Address:  Email Address:  Telephone: | | |

**Specialist Practitioner Profile\* :**

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| Your Profile will be given to potential clients/schools with other non-personal information and it is of great help to potential clients in their choice of Specialist. Your Profile should be a summary of your main qualifications, teaching/tutoring/counselling/relevant professional experience and your approach to the services that you provide. Please only mention the subjects we offer, keeping it relevant to tutoring. **(Esendi Services retain the right to abridge or amend profiles to conform with Company policy.)** |
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**Your DBS Enhanced Check or CRB Enhanced Disclosure:**

This work involves substantial opportunity for access to children and is therefore exempt from the Rehabilitation of Offenders Act 1974.  You are therefore required to declare any convictions, cautions, reprimands or final warnings you may have even if they are otherwise considered spent under the Act.

\*Please indicate if you are required to declare:\*:

Yes   
No   
Please choose one of the two options above.

**To speed up your application you can send us a copy of your CRB Enhanced Disclosure or DBS Enhanced check electronically, or you can send the original to us by post at the address below.**

To send an electronic image you need only send us a photograph of your document using a digital camera e.g. one on a mobile phone (at maximum resolution) or you can send a colour scan from a scanner. Please ensure that you send an image of both the front and back pages and that the whole document is visible.

**If you do not have a CRB Enhanced Disclosure or DBS Enhanced check, we are able to use our Registered Body with the DBS (formerly the CRB) we can obtain a check for you. The fee charged is £65.**

\*Please choose one of the options below\*:

I will send the document by e-mail to [admin@dyslexiacentrenorthwest.co.uk](mailto:admin@dyslexiacentrenorthwest.co.uk)

I will send the document by post (address shown below)   
I do not have an enhanced CRB disclosure or enhanced DBS check - please send me a DBS application pack   
Please choose one of the three options above.

If you are using the post to send your CRB Enhanced Disclosure or DBS Enhanced check, please send it to:

Esendi Services

Within Dyslexia Centre North West

17 Rough Hey Road

Grimsargh

Preston

PR2 5AR

Any documents posted to us must be originals, not photocopies. They will be returned the next working day. Please ensure that you obtain the necessary proof of postage and tracking to ensure the safety of your important documents.

**Declarations:**

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| Please click the box to confirm your agreement. Please tick the box to confirm your agreement.\*I declare that the information given above is true and complete. |
| \*Signed\*: Please **provide a hand-written signature**  A value is required. |
| \*Date\*:  A value is required. |

All tutors are self-employed and are responsible for any tax and national insurance which may be due.

It may be a criminal offence to supply, or offer to supply, private tuition to a person under 17 years of age without having an Enhanced CRB Disclosure or Enhanced DBS Check.

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