



ELITE: THE KINGDOM ORGANIZATION

REHABILITATION CENTER

STAFF RECRUITMENT & SAFER HIRING FORM

A Legacy of Hope, Equality & Empowerment

PHOTO
Attach recent
passport-size
photograph

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CONFIDENTIAL: Complete personally and truthfully. Write N/A where not applicable. False information, omissions or forged documents may result in disqualification or termination. Appointment remains conditional upon satisfactory identity, qualification, reference, professional-registration and role-appropriate safeguarding checks.

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APPLICATION & POSITION DETAILS

Application Ref.	_____	Date Received	___ / ___ / ___
Full Name	_____	CNIC / NICOP	_____
Mobile / WhatsApp	_____	Email	_____
Position Applied	_____	Department	_____

Position category (tick): ☐ Center Manager/Principal ☐ Special Educator ☐ Psychologist ☐ Speech Therapist ☐ Occupational Therapist ☐ Physiotherapist ☐ ABA/Behaviour Therapist ☐ Early Interventionist ☐ Caregiver/Assistant ☐ Admin/HR/Accounts ☐ Driver/Security ☐ Intern/Volunteer ☐ Other: _____
Employment: ☐ Full-time ☐ Part-time ☐ Contract ☐ Internship ☐ Volunteer Preferred shift: ☐ Morning ☐ Afternoon ☐ Flexible Availability/notice: _____ Expected salary/stipend (PKR): _____

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PERSONAL & CONTACT INFORMATION

Date of Birth	___ / ___ / ___	Nationality	_____
Present Address	_____	City / Province	_____
Permanent Address	_____	Emergency Contact	_____
Relation / Mobile	_____	Recruitment accommodation	☐ No ☐ Yes: _____

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EDUCATION, PROFESSIONAL REGISTRATION & TRAINING

Qualification / Training	Institute / Board	Specialization	Year	Grade

Professional body / licence (e.g., AHPC where applicable): _____ Registration No.: _____ Valid until: _____ Relevant safeguarding/first-aid/CPR training: _____

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EMPLOYMENT / INTERNSHIP HISTORY - MOST RECENT FIRST

Employer / Center	Position	From	To	Main Duties / Reason Leaving	Contact?
					☐ Yes ☐ Later
					☐ Yes ☐ Later
					☐ Yes ☐ Later

Explain any employment/education gap of 30 days or more: _____

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RELEVANT EXPERIENCE & ROLE SUITABILITY

Experience with special-needs children / rehabilitation	_____ _____ _____
Key clinical/teaching/administrative skills	_____ _____ _____
Why do you want to join ETKO?	_____ _____ _____

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SAFEGUARDING & SUITABILITY DISCLOSURE

Question	Yes	No
Have you ever been convicted, charged, cautioned or investigated for an offence relevant to this role?	☐	☐
Have you ever faced allegations, disciplinary action, dismissal or restriction involving abuse, neglect, harassment, violence, exploitation or professional misconduct?	☐	☐
Has any professional registration, licence or employment privilege been refused, suspended, restricted or cancelled?	☐	☐
Do you have a relationship, financial interest or conflict that could affect impartial work at ETKO?	☐	☐
Is there any other information that may affect your suitability to work with children or vulnerable persons?	☐	☐

If "Yes", provide confidential details on a separate signed sheet. A disclosure will be assessed fairly and does not automatically disqualify an applicant.

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SAFEGUARDING RESPONSE & PROFESSIONAL CONDUCT

Safeguarding scenario	A child or non-speaking client indicates that an adult has hurt or frightened them. State your immediate actions and what you must avoid doing: _____ _____ _____ _____
Safe practice example	Describe one example demonstrating dignity, consent/assent, professional boundaries and person-centred support: _____ _____ _____

Initial each commitment:

1. I will place the safety, dignity, rights, best interests and individual needs of every child and vulnerable person first.	_____
2. I will never use corporal punishment, humiliation, threats, intimidation, degrading treatment, retaliation or unlawful restraint.	_____
3. I will maintain professional boundaries and will not groom, exploit, harass, favour or form inappropriate relationships with clients or families.	_____
4. I will use therapeutic touch, intimate care, feeding support or physical assistance only when trained, authorised, necessary, respectful and documented.	_____
5. I will immediately report safeguarding concerns through ETKO procedures and will not investigate, promise secrecy, confront an alleged offender or conceal information.	_____
6. I will protect confidential records, images and personal information and will not use a client's photo or story without approved written consent.	_____
7. I will follow authorised pick-up, attendance, supervision, medication, incident-reporting and emergency procedures.	_____
8. I understand that retaliation against a reporter, whistleblower, child, family or colleague is prohibited.	_____

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PROFESSIONAL REFERENCES - THREE REQUIRED

Provide current/most recent supervisor, previous employer/academic supervisor, and a person who observed your work with children, persons with disabilities, patients or vulnerable adults. Referees should not be relatives or close friends.

Referee Name	Title / Organization	Relationship	Mobile / Email	Dates Known	Contact Now?
					☐ Y ☐ Later
					☐ Y ☐ Later
					☐ Y ☐ Later

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DOCUMENTS CHECKLIST

☐ Updated CV / résumé	☐ CNIC / NICOP copy	☐ Recent photographs
☐ Educational certificates	☐ Registration / licence	☐ Experience certificates
☐ Training certificates	☐ Police/character certificate*	☐ Driving licence / other role document

*When requested and lawfully appropriate to the role. Originals may be required for verification.

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APPLICANT DECLARATION, VERIFICATION CONSENT & SIGNATURE

I declare that this form and all attachments are complete and accurate to the best of my knowledge. I authorise Elite: The Kingdom Organization to verify my identity, qualifications, professional registration, employment history, references and other job-related information, and to conduct lawful role-appropriate police-record and safeguarding checks. I authorise former employers, institutions, professional bodies, referees and relevant authorities to provide truthful recruitment information. I understand that appointment is conditional until required clearances are satisfactory; this application is not an employment contract; and material falsehood, omission or forged documentation may result in withdrawal of an offer or termination. I consent to confidential processing and retention of recruitment information for legitimate recruitment, safeguarding, legal and records-management purposes.

Applicant Name	_____	CNIC / ID	_____
Signature	_____	Date	____ / ____ / ____

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FOR OFFICE USE ONLY - SCREENING, VERIFICATION & DECISION

Application complete	☐ Yes ☐ Clarify	Minimum criteria met	☐ Yes ☐ No
Identity verified	☐ Clear ☐ Pending	Qualifications verified	☐ Clear ☐ Pending
Registration/licence	☐ Clear ☐ N/A ☐ Pending	References	☐ Clear ☐ Pending
Police/character check	☐ Clear ☐ N/A ☐ Pending	Safeguarding review	☐ Clear ☐ Escalate
Interview score	____ / 100	Practical assessment	____ / 100 / N/A
Risk rating	☐ Low ☐ Moderate ☐ High	Decision	☐ Appoint ☐ Hold ☐ Reject
Selected role / salary	_____	Start date / probation	_____

HR / Interview notes or conditions: _____

HR Reviewer	_____	Date	____ / ____ / ____
Approving Authority	_____	Signature	_____

APPOINTMENT CONTROL: No applicant may begin unsupervised contact with children or vulnerable persons until mandatory identity, reference, qualification, professional-registration and safeguarding clearances are complete. Any temporary supervised arrangement must be formally approved, documented, lawful, proportionate and time-limited.