

Outstanding Education Solutions Ltd

BOOKING CONFIRMATION

School: Your School **Date:** DD/MM/YYYY

Herefordshire
HR1 1AA

School Phone: 01432 123123

School Contact: Mr A Headteacher

Requirement: Class X Teacher
Quantity: 1

Your cover staff: **Charlotte Hoare**

Start Date: DD/MM/YYYY

Days of Work:

Charge Rate: £ per day

DBS number: 001122334455

DBS Issue date: DD/MM/YYYY

L99 checked date: DD/MM/YYYY

Teacher ref number: 1234567

Qualification: e.g. PGCE

Prohibited from teaching checked date: DD/MM/YYYY

Disqualification by Association checked date: DD/MM/YYYY

Invoiced: Weekly



Several other checks have been completed; including 2 up to date references which are available upon request. Please speak to your consultant if you require further information on the checks that have been completed on your temporary member of staff.

It is your responsibility to advise Outstanding Education Solutions whether you have had the temporary member of staff (as advised above) through any other agency or LEA working in a similar role (such as teacher, or TA regardless of subject) at your school within the last 6 weeks.

Please advise Outstanding Education Solutions if there are any known Health and Safety risks currently at school that we should be aware of.

We are pleased to be of assistance to you, all our placements are made in accordance with Outstanding Education Solutions Terms of Business. Please also note that **Charlotte Hoare** is engaged under a contract for services with Outstanding Education Solutions and has confirmed that they are willing to work in the assignment offered.

Kind regards,
Charlotte Hoare
Director
charlotte@outstandinged.com