**Educator Interview Questions:**

Please ensure that these interview questions are completed as a part of suitability of an educator into our team.

All answers are to be completed.

|  |  |
| --- | --- |
| **APPLICANT’S NAME: DATE OF INTERVIEW:** | |
| **QUESTIONS:** | **ANSWERS:** |
| 1. ***Can you tell me about your philosophy?*** |  |
| 1. ***What is your vision of FDC?*** |  |
| 1. ***Why did you pick HAFDC as a service? (the educators motivation and reasoning)*** |  |
| 1. ***What values are important to you? And how would these be implemented in your FDC service.?*** |  |
| 1. ***What expectation do you have of the scheme and your consultant?*** |  |
| 1. ***What do you love about FDC and operating FDC? What don’t you like?*** |  |
| 1. ***How involved would you like to be with your scheme? Including training, networking with others*** |  |
| 1. ***What strengths do you identify you have and also how would these impact on your service?*** |  |
| 1. ***What is your experience with children? How experienced do you feel you are and how confident do you feel to be left in sole care of a FDC Service?*** |  |
| 1. ***Why are you moving from your other service?*** |  |
| 1. ***Have you received any breaches or de registration from another service? What was the reasoning for this?*** |  |
| 1. ***How would you make the environment welcoming for children and parents? What learning areas would you create?*** |  |
| 1. ***What do you feel is appropriate for behaviour management?*** |  |
| 1. ***Have you completed your child Protection Qualification ( Identify and Respond to Children at Risk of Harm?*** |  |
| 1. ***Are you aware of these documents and how to access them? (Education and Care National Regulations, Education and Care National Standards, Education and Care National Law & Early Years Learning Framework)*** |  |
| 1. ***Do you hold any particular prejudices? Do you feel this could impact you caring for the children and their families?*** |  |
| 1. ***What do you feel the parent’s involvement should be while the child attends FDC?*** |  |
| 1. ***Are you aware that while you are providing care as an educator or relief care you will be responsible for the daily duties that the Family Day Care Educator performs?***   ***If yes, are you comfortable with this?*** |  |
| 1. ***Are you aware that you are required to document and record information throughout the day? This will include programming, observations, incident reports, nappy chart and sleep charts?***   ***How do you feel about this and what experience have you had with this type of paper work before?*** |  |
| 1. ***How would you handle an emergency situation?*** |  |
| 1. ***What things should be kept confidential and why?*** |  |
| ***CONSULTANT’S COMMENTS AND FEEDBACK:*** |  |
| ***CONSULTANT’S NAME COMPLETING THE INTERVIEW:*** |  |
| ***EDUCATOR’S SIGNATURE:*** | ***In signing this document you agree and admit that the information that you have given is true and correct.*** |
| ***DATE:*** |  |
| ***DECISION:*** | **CONTINUE REGISTRATION PROCESS.**  **NOT A SUITABLE APPLICANT.** |