**Application Form**

**Confidential**

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| **POST APPLIED FOR:** | | |
| 1. **PERSONAL DETAILS** | | |
| **TITLE:** | **FORENAMES:** | **SURNAME:** |
| **PREVIOUS SURNAMES:** | | |
| **ADDRESS:** | | **WORK TEL NO:** |
|  | | **HOME TEL NO:** |
| **MOBILE NO:** |
| **May we contact you at work?:** |
| **EMAIL ADDRESS:** | | |
| **NATIONAL INSURANCE NUMBER:** | | |

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| 1. **EMPLOYMENT STATUS** |
| **Are there any restrictions on your residence or employment in the UK?** |
| **If yes please give details:** |

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| 1. **SUPPORTING STATEMENT** |
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| 1. **PRESENT OR MOST RECENT EMPLOYMENT** | | | |
| **NAME OF EMPLOYER:** | | **ADDRESS:** | |
| **POST HELD:** | | | **PRESENT ANNUAL SALARY:** |
| **DATE OF APPOINTMENT:** | **DATE LEFT: (if applicable)** | | **REASONS FOR LEAVING:** |
| **BRIEF DESCRIPTION OF DUTIES**: | | | |

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| 1. **PREVIOUS EMPLOYMENT** | | | | |
| **Employer** | **Title** | **Salary** | **Brief description of duties** | **Dates of employment & reasons for leaving** |
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| 1. **EDUCATION AND ACADEMIC QUALIFICATIONS** | | | |
| **School/College/University** | **From:** | **To:** | **Subjects/Qualifications/Grades/Honours, dates awarded and awarding body:** |
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| 1. **TRAINING UNDERTAKEN DURING THE LAST 3 YEARS RELEVANT TO THIS APPLICATION** | | | |
| **Course Title:** | **Provider:** | **Date & duration of course:** | **Award (if applicable):** |
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| 1. **OTHER PAID WORK / VOLUNTARY WORK EXPERIENCE** | | | |
| **Employer/Organisation** | **From:** | **To:** | **Nature of occupation:** |
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| 1. **DETAILS OF OTHER ACTVITIES, SKILLS & INTERESTS RELEVANT TO THIS POST** |
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| 1. **PROFESSIONAL REFERENCES** |
| **Please supply the** **names and addresses of two persons willing to provide references. One should be from your current or most recent employer. References will NOT be accepted from relatives or people writing solely in the capacity of friends.** |
| **NAME:**  **ADDRESS:**    **TELEPHONE NUMBER:**  **E-MAIL:**  **POSITION HELD:**  **Please state the context in which this person is known to yourself:** |
| **NAME:**  **ADDRESS:**  **TELEPHONE NUMBER:**  **E-MAIL:**  **POSITION HELD:**  **Please state the context in which this person is known to yourself:** |

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| **DECLARATION BY APPLICANT** |

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| **I understand that appointment to this post is subject to a satisfactory Disclosure and Barring Service check. I also understand that, under the terms of the Rehabilitation of Offenders Act 1974 (Exceptions Order 1975, and subsequent amendments), I am required to disclose any record I may have of criminal convictions, cautions and blind-overs, including those regarded as ‘spent’ and to attach details of the same.\***  **Have you any criminal convictions, cautions or blind-overs, including those regarded as spent?**  **Yes (details attached)  No**  **\* Please note: information about criminal convictions, cautions and blind-overs will remain confidential but will be made available to the panel for consideration if your application is short-listed.** |

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| **I declare that I am not on List 99, or disqualified from working with children, or subject to any sanctions imposed by a regulatory body (e.g. the General Teaching Council)** |

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| **I understand that under the terms of the Asylum and Immigration Act 1996 should I be short-listed for the post for which I am applying, I will provide for the governing body, as employer, an original document\* showing my entitlement to work in this country.**  **\* Acceptable documents include your National Insurance card, a birth certificate issued in the UK or Eire, a P45 from your previous employer, a valid passport, or any relevant authorisation allowing you to work in this country.** |

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| **Are you related to any member of staff or Governor of the appointing school? Yes  No**  **If YES, who and in what capacity?**  I appreciate that I must declare any family or close relationship with a member of the school’s governing body, an employee of the school. I understand that failure to disclose such a relationship may result in my disqualification**.** |

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| **I certify that all information given by me on each section of this form and in supporting documents is correct to the best of my knowledge and belief, that all questions have been fully and accurately answered, and that I possess all qualifications which I claim to hold and will produce evidence of the same. I acknowledge that I have read, understand and will comply with the information in the Applicant Pack, which accompanied this application form.**  **I understand that my name will be withdrawn from the list of candidates if, prior to appointment, I am found knowingly to have omitted or concealed any relevant fact, and I acknowledge that such discovery subsequent to appointment is likely to lead to my dismissal without notice and, where appropriate, referral to the police. I hereby consent to the processing of sensitive personal data, as defined by the Data Protection Act 1998, involved in the consideration of this application.**  **SIGNED: DATE:** |

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| **ADDITIONAL INFORMATION (CONFIDENTIAL) – This section of the form seeks additional information pertinent to your application. It will be removed before shortlisting and will not be seen by any members of the selection panel. Access to it will be limited to staff involved in administering the appointment process who need access for equal opportunities monitoring or to take administrative action based upon the information provided e.g. Occupational Health referral.** |
| ***Thank you for your application. Please note: in the interest of economy, only shortlisted applicants will receive further notification.*** |
| **Position applied for:**  **Title:**  **First Name:**  **Surname:**  **Date of Birth:** |

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| **HEALTH** |
| **Do you consider that you have any disability as defined within the terms of the Disability Discrimination Act 1995, which has a substantial effect on your ability to carry out normal day to day activities?**  **Yes  No**  **If Yes, please give brief details of the disability and any adjustments which you consider you would need to be made to enable you to carry out the post for which you are applying:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Will you require assistance if called for an interview? Yes  No**  **If Yes, please give details:** |

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| **EQUAL OPPORTUNITIES MONITORING (CONFIDENTIAL) – We wish to continuously monitor (in the strictest confidence) the progress of our Equal Opportunities Policy. Please help us by giving the fullest possible answers to the questions below.** |
| **Sex: M  F  Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Age: 20-29  30-39  40-49  50-59  60-65**  **Please indicate your culture / ethnic origins:**  This information is included as part of the duty of the school to promote race equality and to ensure equal opportunities for all staff and is recommended by the Commission for Racial Equality**.**  Please tick the box you consider best describes your ethnic origin.  Asian / Asian British: Pakistani 🞏 Chinese 🞏  Asian / Asian British: Bangladeshi 🞏 Mixed White and Black Caribbean 🞏  Asian / Asian British: Indian □ Mixed White and Black African 🞏  Asian / Asian British: Sikh 🞏 Mixed White and Asian 🞏  Asian / Asian: Other 🞏 Mixed Other 🞏  Black / Black British: Caribbean 🞏 White British 🞏  Black / Black British: African 🞏 White Irish 🞏  Black / Black British: Other 🞏 White Other 🞏  Other (please specify) 🞏 Prefer Not to Say 🞏 |