

Internal use only

Ref . No. _____

Date Received _____

Employment Application Form: Teaching

The Governing Body is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.

Please ensure that you complete all sections of Part 1 and Part 2 of the application. Please note that providing false information will result in the application being rejected, or withdrawal of any offer of employment, or summary dismissal if you are in post, and possible referral to the police. Please note that checks may be carried out to verify the contents of your application form. Please complete the form in black ink.

Vacancy Job Title	
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Part 1. INFORMATION FOR SHORTLISTING AND INTERVIEWING

Initials _____

Surname or Family name _____

2. **LETTER OF APPLICATION** Please enclose a letter of application. *Please refer to the applicant information pack which may include instructions on completion of the letter of application.*

3. PRESENT / LAST APPOINTMENT: IF TEACHING

Name, address and telephone number of school	
1 Type of school	Boys Girls Mixed Age range Number on Roll
2 Type of school	<i>eg Community, Aided, Foundation, Academy, Independent etc</i>
Job title <i>Please enclose a copy of your current job description</i>	
Subjects/age groups taught	
Date appointed to current post	
Current salary	
Date available to begin new job	

4. PRESENT / LAST APPOINTMENT: IF NON-TEACHING

Name address and telephone number of employer	
Job title <i>Please enclose a copy of your current job description</i>	
Date appointed to current post	
Current salary	
Date available to begin new job	

5. **FULL CHRONOLOGICAL HISTORY** Please provide a full history in chronological order since leaving secondary education, including periods of any post-secondary education/training, and part-time and voluntary work as well as full time employment, with start and end dates, explanations for periods not in employment or education/training, and reasons for leaving employment.

Job Title or Position	Name and address of school, other employer, or description of activity	Number on roll and type of school, if applicable	F/T or P/T	Dates				Reason for leaving
				From		To		
				Mth	Yr	Mth	Yr	
1								
2								
3								
4								
5								
6								
7								
8								

Please enclose a continuation sheet if necessary

6. SECONDARY EDUCATION & QUALIFICATIONS

Name of School/College	From	To	Qualifications Gained with Date

7. HIGHER EDUCATION

Name and Addresses of University or College and/or University Education Department	Dates From To	Full or Part-time	Date of Exam	Qualifications Obtained	Subjects Passed with Details of Standard Obtained	Age Groups for which Trained

8. PROFESSIONAL COURSES ATTENDED AS A TEACHER Please list relevant courses attended in the past 3 years.

Subject	Organising Body	Date(s)	Duration

9. OTHER RELEVANT EXPERIENCE, INTERESTS AND SKILLS

This section will be separated from Part 1 on receipt. Relevant contents may be verified prior to shortlisting but will not then be used for selection purposes.

10. PERSONAL INFORMATION

1. Surname or family name	
2. All previous surnames	
3. All forenames	
4. Title	
5. Current Address	
6. Postcode	
7. Resident at this address since	
8. Home telephone number	
9. Mobile telephone number	
10. Date of Birth	
11. Email address	
12. DfES reference number	
13. National Insurance Number	
14. Are you registered with the General Teaching Council?	Yes No
15. Did you qualify as a teacher after May 1999?	Yes No If Yes, in which school was induction completed?
16. Have you ever been subject to an investigation by your employer, the General Teaching Council or DCFS or placed on List 99?	Yes No If YES please state separately under confidential cover the circumstances and the outcome including any orders or conditions.
17. Are you subject to any legal restrictions in respect of your employment in the UK?	Yes No If YES please provide details separately
18. Do you require a work permit?	Yes No If YES please provide details separately
19. Do you have a current full driving licence?	Yes No
20. Are you related to or have a close personal relationship with any pupil, employee, or governor?	Yes No If YES give details separately under confidential cover
21. NQTs ONLY: Have you provided evidence of passing the Skills Tests? <i>Please tick or cross</i>	Numeracy Literacy ICT
22. Are there any special arrangements which we can make for you if you are called for an interview and/or work based assessment?	Yes No If Yes please specify, (e.g. ground floor venue, sign language, interpreter, audiotape etc).

11. ETHNIC GROUP

You are asked to complete the grid below for the purpose of monitoring applicants for employment by reference to the racial groups to which they belong. However, you are not obliged to do so.

Please tick the relevant box		✓
WHITE	British	
	English	
	Welsh	
	Scottish	
	Irish	
	Other White background	
MIXED	White and Black Caribbean	
	White and Black African	
	White and Asian	
	Other Mixed background	
ASIAN or ASIAN BRITISH	Indian	
	Pakistani	
	Bangladeshi	
	Other Asian background	
BLACK or BLACK BRITISH	Caribbean	
	African	
	Other Black background	
CHINESE	Chinese	
OTHER ETHNIC GROUP		
NOT STATED		

12. REFEREES

Give here details of two people to whom reference may be made. The first referee should normally be your present or most recent headteacher or equivalent person. If you are not currently working with children please provide a referee from your most recent employment involving children. Referees will be asked about disciplinary offences relating to children, which may include any in which the penalty is "time expired" and whether you have been the subject of any child protection concerns, and if so, the outcome of any enquiry or disciplinary procedure. References will not be accepted from relatives or from people writing solely in the capacity of friends.

First referee

Title and Name	
Address and post code	
Telephone number	
Email address	
Job Title	
Relationship to applicant	

Second referee

Title and Name	
Address and post code	
Telephone number	
Email address	
Job Title	
Relationship to applicant	

13. COMPULSORY DECLARATION OF ANY CONVICTIONS, CAUTIONS OR REPRIMANDS, WARNINGS OR BIND-OVERS

Jobs in schools are exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974. **You must** therefore declare, whether spent or not, any convictions, cautions or reprimands, warnings or bind-overs which you have ever had and give details of the offences. The fact that you have a criminal record will not necessarily debar you for consideration for this appointment.

Do you have **ANY** convictions, cautions or reprimands, warnings or bind-overs?
Please tick the relevant box

Yes

No

If the answer is "yes", you must record full details in a separate, sealed envelope marked with your name and 'Confidential: Criminal Record Declaration' and enclose it with your application. In accordance with statutory requirements, an offer of appointment will be subject to satisfactory CRB clearance. A copy of this notice will be sent to your referees.

15. DATA PROTECTION ACT

The information collected on this form will be used in compliance with the Data Protection Act 1998. The information is collected for the purpose of administering the employment and training of employees. The information may be disclosed, as appropriate, to the governors, to Occupational Health, to the General Teaching Council, to the Teachers Pensions Agency, to the Department for Education and Skills, to pension, payroll and personnel providers and relevant statutory bodies. You should also note that checks may be made to verify the information provided and may also be used to prevent and/or detect fraud.

16. NOTES

- a) When completed, this form should be returned in accordance with the instruction in the advertisement for the job or in the applicant's information pack.
- b) Canvassing, directly or indirectly an employee or governor will disqualify the application.
- c) Candidates recommended for appointment will be required to complete a pre-employment medical questionnaire and may be required to undergo a medical examination.

17. DECLARATION

I certify that, to the best of my knowledge and belief, all particulars included in Parts 1 and 2 of my application are correct. I understand and accept that providing false information will result in my application being rejected or withdrawal of any offer of employment, or summary dismissal if I am in post, and possible referral to the police. I understand and accept that the information I have provided may be used in accordance with paragraph 15 above, and in particular that checks may be carried out to verify the contents of my application form

Signature of Candidate

Date

Print Name