**Application for Appointment (Support Staff)**

All applicants are considered on the basis of their suitability for the post irrespective of their sex, age, marital status, pregnancy or maternity, race, gender reassignment, sexual orientation, religion and belief or disability.

If you have a disability that affects the written completion of this form please tell us and an alternative format may be arranged.

Whether or not a CV or other documentation is attached, please complete this form in full.

|  |
| --- |
| Post applied for:  How did you hear about this vacancy? |

# Personal Details

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Surname: |  | | | | |  | First names: | |  | | |
| Former name(s) (if applicable)\* | | | |  | |  | Preferred title: Mr/Mrs/Miss/Ms/Other: | | | |  |
| Address: | | | | | |  | Telephone Number | | | | |
|  | Daytime: |  | | | |
|  | Evening: |  | | | |
| Post Code: | |  | | | |  | Mobile: |  | | | |
| e-mail address: | | |  | | | | | | | | |
| National Insurance Number:\* | | | | |  |  | Date of birth:\* | | |  | |
| \* Required for full identification purposes | | | | | |  |  | | | | |

# Education, Training and Qualifications

|  |  |  |
| --- | --- | --- |
| Secondary and further education, plus training courses relevant to the job for which you are applying.  Please continue on a separate sheet if necessary. | | |
| **School, College, University** **and/or Training Course.** | **Dates from - to.** (Please account for any gaps in the date range) | **Examinations, Subjects, Course** **qualifications, Certificates awarded.** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

# Membership of Professional Organisations

|  |  |
| --- | --- |
| **Professional organisation** | Grade and date of membership |
|  |  |
|  |  |
|  |  |

# Participation in Voluntary, Recreation or General Interest Groups

|  |  |
| --- | --- |
| **Name of organisation** | **Offices held** |
|  |  |
|  |  |
|  |  |

# Current/Most Recent Position Held

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Position/Job title: | | | | |  | | | | | | | | | | |
| Name and address of school/college: | | | | | | | |  | | | | | | | |
|  | | | | | | | | | | | | | | | |
| Post code: |  | | | | | | | | Tel No: | | |  | | | |
| Web address: | | | |  | | | | | | | | | | | |
| Type of establishment: | | | | | |  | | | | | | | | | |
| No on roll (aprox) and age range: | | | | | | |  | | | | | | | | |
| Name and address of Authority (or employing body): | | | | | | | | | | |  | | | | |
|  | | | | | | | | | | | | | | | |
| Post code: | |  | | | | | | | | Tel No: | | |  | | |
| Key tasks, responsibilities and achievements: | | | | | | | | | | | | | | | |
| Starting date: | | |  | | | | | | | Starting salary: | | | |  | |
| Leaving date: | | |  | | | | | | | Spinal point: | | | |  | |
| Allowances: | | |  | | | | | | | Current/leaving salary: | | | | |  |
| Period of notice required or available start date:  Reason for leaving : | | | | | | | | | |  | | | | | |

**Previous Employment/Voluntary and/or Domestic Activities**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Starting with the job before the current/most recent one, give details of your employment history including any periods of time not spent in employment (any gaps must be accounted for). | | | | |
| Employer – Name, address and nature of business | Job title and key tasks/responsibilities | Date from | Date to | Reason for leaving |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Continue on a separate sheet if necessary*.***

# Experience, Skills, Abilities and Career Aspirations

|  |
| --- |
| Please tell us how you think you meet the requirements for this job. You may wish to use details of your previous jobs, voluntary work, other activities or your personal interests. This is your opportunity to tell us more about your achievements and your aspirations for your future career. |
|  |

**Continue on a separate sheet if necessary.**

# Other Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Do you have a partner or any family or relatives working for this Organisation? | | | | YES / NO | |
| (If yes please give their name and where they work) | |  | | | |
| Would you be willing to undergo a medical examination following conditional appointment? | | | | YES / NO | |
| If you have a disability will you require any form of assistance to enable you to participate in the recruitment process equally and fully? | | | | YES / NO | |
| If YES please describe any reasonable adjustments we need to be aware of in advance. | | | | | |
| Are you able to travel during the course of your work? | | | | YES / NO | |
| Do you have a driving licence? |  | | | | YES / NO |
| If YES, is it; | | | PROVISIONAL / FULL / HGV / PSV | | |
| Are you entitled to work in the UK? | | | | | YES / NO |
| Every applicant will be asked for proof of their eligibility to work in the UK at interview stage. | | | | | |
| (Please contact us in advance if you need us to sponsor you under the UK Border agency points based scheme for skilled workers (Tier 2)). | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| The work you are applying for is a regulated activity requiring an Enhanced DBS with Barred List Check and is therefore exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974.  All applicants are asked to complete the supplementary ‘declaration form’ on which you are therefore not entitled to withhold information about convictions that, for other purposes under the Act are regarded as spent other than certain spent convictions and cautions which are 'protected' and are not subject to disclosure to employers, and cannot be taken into account under the amendments to the Exceptions Order 1975 (2013). This form should be appended in a sealed envelope marked confidential.  Guidance and criteria on the filtering of these cautions and convictions can be found on the Disclosure and Barring Service website.   |  |  |  |  |  | | --- | --- | --- | --- | --- | | Are you on an DBS barred list, disqualified from work with children or subject to sanctions imposed by a regulatory body e.g. the Department for Education? | | | | YES / NO | | If you have a current DBS/CRB check number please enter it here; | | |  | | | Date of issue: |  | Issued by: |  | | |

**References**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Please give details of two referees - one must be your present or last employer. | | | | | | | | | | |
| Name: |  | | | |  | Name: |  | | | |
| Address:  Email Address: | | | | |  | Address:  Email Address: | | | | |
| Telephone Number: | | |  | |  | Telephone Number: | | |  | |
| Position: | |  | | |  | Position: | |  | | |
| May we approach them now? | | | | YES/NO |  | May we approach them now? | | | | YES/NO |

## Declarations

|  |  |  |  |
| --- | --- | --- | --- |
| I certify that, to the best of my belief, the information I have supplied is true and complete.  I understand that any false information or failure to disclose health problems, criminal convictions or prosecutions pending may disqualify me from employment or render me liable to summary dismissal. I understand that this organisation reserves the right to verify claims made in this application and I consent to the organisation requesting an enhanced DBS check on me. | | | |
| Signature: |  | Date: |  |
|  | |  | |

**Thank you for your application**

**Rehabilitation of Offenders Act 1974 Declaration.**

The work you are applying for is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974.

All applicants are asked to complete this declaration form on which you are not entitled to withhold information about convictions, cautions, reprimands or final warnings, which would not be filtered in line with current guidance from the DBS that, for other purposes under the Act, are regarded as spent. The academy has a statutory duty to conduct certain pre-employment checks on all people applying to work with us. The information obtained from these checks is used to help safeguard children.

We will not discriminate unfairly against candidates with convictions which we consider as unrelated to working with children. Having a criminal record will not automatically bar you from employment or voluntary work with the academy. The academy will take a proportionate view of past offences and will only exclude candidates from interview if the declared convictions or cautions are relevant to the work you are applying to do. We will look at the information after short listing in order to give the candidates a chance to discuss any declaration.

The completed form should be submitted along with the application form in a sealed envelope marked ‘Confidential – declaration form’ adding your name to link it to your application.

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Date of Birth: |  |
| Position applied for: |  | Date of application: |  |
|  | | | |
| Do you have any convictions, cautions, reprimands or final warnings, which would not be filtered in line with current guidance from the DBS? | | | YES / NO |
|  | | |  |
| If YES please provide details here. | | | |
| Have you any current police investigations pending? | | | YES / NO |
|  | | |  |
| If YES please provide details here. | | | |
| Have you **ever** been the subject of a child protection concern, been investigated or been disciplined for the same? If YES please provide brief details below of the outcome below. | | | YES / NO |
|  | | |  |
| If YES please provide details here. | | | |

Signed Dated