

Application Form

Job Title:

CONFIDENTIAL

PERSONAL DETAILS

Last Name:

Title:

First Names:

Have you ever had a different surname:

Yes

☐

No

☐

Previous Name(s):

Home Address:

Tel no:

Mobile no:

E-mail:

NB. The boxes will expand as you type in your details

EDUCATION, QUALIFICATIONS AND TRAINING

| Secondary School/College | Full or Part-time | Qualifications attained/to be taken. Subjects | Grades Attained | Year taken/ to be taken |
|--------------------------|-------------------|---|-----------------|-------------------------|
| | | | | |

| Higher Education Institutes | Dates | | Full or Part-time | Qualifications attained/to be taken. Subjects | Grade Attained | Year taken/ to be taken |
|-----------------------------|-------|----|-------------------|---|----------------|-------------------------|
| | From | To | | | | |
| | | | | | | |

In-Service Education, Courses and Training (over last 3 years) – Please continue on a separate sheet

| Dates and Duration | Title of Course/Training | Name of Provider (eg LEA, College) | Qualification (if any) |
|--------------------|--------------------------|------------------------------------|------------------------|
| | | | |

NB. The boxes will expand as you type in your details

ELIGIBILITY TO WORK IN THE UK

| | | | | | |
|--|-------------------|-----|--------------------------|----|--------------------------|
| Are you eligible to work in the UK/EEA? | | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Do you require a work permit? | | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| National Insurance number (LLNNNNNNNL, L Letter, N Number) | | | | | |
| For non-EU applicants only | | | | | |
| Do you require a sponsorship certificate? | | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| If yes, please give following: | Sponsorship TIER: | No: | Expiry date: | | |

EXPERIENCE – Current place of work

[illegible]

CURRENT SALARY DETAILS

| Grade/Scale | £ | Spine points | | Allowances | |
|-------------|---|--------------|--|------------|--|
| | | | | | |

EXPERIENCE – Previous places of work

Details of all other paid or unpaid employment or experience. It is important that you include periods of breaks in employment since leaving school. Please give details of these periods and your activities during these times, these might include: career breaks to raise a family, travel, voluntary work, training, long periods of sickness, unemployment (detailing which office you may have received benefits from), and if you have been self employed you will need to provide proof.

[illegible]

| OTHER WORK EXPERIENCES (including career breaks) | |
|--|--|
| | |

Details of all other paid or unpaid employment or experience. It is important that you include periods of breaks in employment since leaving school. Please give details of these periods and your activities during these times, these might include: career breaks to raise a family, travel, voluntary work, training, long periods of sickness, unemployment (detailing which office you may have received benefits from), and if you have been self employed you will need to provide proof.

| Organisation/Description of career break | Position held | Period of Service | | | | | |
|--|---------------|-------------------|---|---|----|---|---|
| | | From | | | To | | |
| | | D | M | Y | D | M | Y |
| | | | | | | | |

SUPPORTING STATEMENT

Please explain how your ability, skills and knowledge match those required for the appointment. Please consider all your experience whether paid or unpaid. Give examples (where possible) in support of your application.

Please type this section of the application form and attach your Statement.

NB. The box will expand as you type in your statement

(please use additional paper if you need more room)

PROTECTION OF CHILDREN / SAFEGUARDING OF VULNERABLE ADULTS (Rehabilitation of Offenders Act 1974)

We are committed to safeguarding and promoting the welfare of children, young people and vulnerable adults, and expect all staff and volunteers to share this commitment. All our posts are subject to a satisfactory Disclosure and Barring Service (DBS) check.

The job for which you are applying has substantial opportunity for access to children/vulnerable adults. Your employment is therefore exempt from the Rehabilitation of Offenders Act 1974. You will be required to complete a Disclosure and Barring Check (DBS). You must therefore give details of any convictions, cautions, reprimands and/or pending prosecutions you have, even if they would otherwise be regarded as 'spent' under this Act.

Have you been convicted of a criminal offence other than a road traffic offence not involving injury to a third party, or a sentence of imprisonment? Yes ☐ No ☐

If yes, please provide details below:

Date:

Offence:

Sentence:

Please note: All information we receive will be treated as confidential.

APPLICANTS FROM OUTSIDE THE UK

Applicants from outside the UK need to provide an overseas criminal records check and/or certificate of good conduct from their home country.

I can provide this information Yes ☐ No ☐

REFEREES

If you are selected for an interview we will obtain at least two references which may cover a full five year history; they could include time spent in education. Your first referee must be your current or last employer if you have one. If you are a school/college leaver, give the details of your Headteacher or Tutor. Relatives will not be accepted as a referee. In addition to information on ability and performance, we will be seeking information on recent sickness if offered the position.

1) Name

2) Name

Position

Position

Address

Address

Email

Email

Tel no

Tel no

GENERAL INFORMATION

When would you be free to commence work?

DISCLOSURE OF RELATIONSHIP

Are you related to, or do you have a close personal relationship with, any Orchard Hill College employee, OHCAT Board Member, OHCAT employee, College Governor or School Governor?

Yes ☐ No ☐ If yes, state the name, relationship and position held

I declare that the information given on this form is correct to the best of my knowledge and belief and I understand that any false statements on this form will justify dismissal from the School's/College's service. I hereby give my permission for a DBS/police check and other clearances to be carried out.

Name:

Date:

By providing my name or email address, this means that I have read, understood and agreed to the above.

EQUAL OPPORTUNITIES MONITORING FORM

We are committed to ensuring equality of opportunity for all applicants. We will monitor the profile of those undertaking training and the outcomes of the training by using the information provided below. Information from this form will not be used for recruitment or selection purposes.

Name _____

1) Ethnicity

How would you best describe your ethnicity? (Please choose ONE section from A to E, and then tick the appropriate box to indicate your cultural background)

A. White

- ☐ British
- ☐ Irish
- ☐ Any other White background

Please state which

B. Mixed

- ☐ White and Asian
- ☐ White and Black African
- ☐ White and Black Caribbean
- ☐ Any other Mixed background

Please state which

C. Asian or Asian British

- ☐ Bangladeshi
- ☐ Indian
- ☐ Pakistani
- ☐ Any other Asian background

Please state which

D. Black or Black British

- ☐ African
- ☐ Caribbean
- ☐ Any other Black background

Please state which

E. Other ethnic group

- ☐ Chinese
- ☐ Any other ethnic group

Please state which

2) Gender ☐ Male ☐ Female

3) Date of birth

4) Impairments or Conditions

If we ask you to come for an interview or to the next stage of the selection process, are there any access arrangements, adjustments or adaptations you would like us to provide?

☐ Yes ☐ No

The Disability Discrimination Act considers a person disabled if:

- ~ You have a longstanding physical or mental condition or disability that has lasted or is likely to last at least 12 months and
- ~ This condition or disability has a substantial adverse effect on your ability to carry out normal day-to-day activities

Do you consider you have a condition or impairment which falls within the Disability Discrimination Act?

☐ Yes ☐ No

**STRICTLY PRIVATE AND CONFIDENTIAL
WHEN COMPLETED**