|  |
| --- |
| **Contact details:**Emmanuelle FAVILLIERLycée Français Charles De Gaulle35 Cromwell RoadLondon SW7 2DGT – 0207 590 6805**efavillier@lyceefrancais.org.uk****The Lycée is committed to safeguarding and promoting the welfare of children and young people and expects all its staff and volunteers to share this commitment. All postholders are subject to satisfactory enhanced DBS disclosure.** |
|  |

**Teaching Staff Application Form**

|  |
| --- |
| 1. ABOUT YOUR APPLICATION: Please read carefully |
| This form should be returned by email (see contact detail above) together with a **separate supporting statement/letter** **of application of no more than two A4 sheets** referring specifically to the requirements of the job description/person specification. Word Processed or handwritten application forms and statements are both acceptable methods of submission. |
| **Application for the post of**  **Qualified Secondary History and Geography teacher – International Classes** |

|  |
| --- |
| **2. PERSONAL DETAILS – please complete this section in BLOCK CAPITALS** |
| Surname: Title (Mr/Ms): Forenames: DFE Teacher Reference No: GTC No: If you are not a European Union Citizen please state if you require a work permit Yes No  | Address: County: Postcode: Telephone No: Mobile No: Email:  |

|  |
| --- |
| **3. SUBJECTS YOU CAN TEACH**  |
| a Main: b Others: c Extra-curricular activities you can lead/support:  |

|  |
| --- |
|  **4. PRESENT POST** (or most recent if unemployed)  |
| Local Authority (where relevant):  School:  School address: School Telephone number: Number on roll:  Appointment Held: Full or part time: Date Appointed (as deputy Head): To: Reasons for applying: |
| STATUS: Subjects, age groups taught and other responsibilities:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Present Salary and Scale Point: Notice Required and/or date available:  |

|  |
| --- |
| **5. PREVIOUS EXPERIENCE** If part time appointment, please state and give details. All gaps in employment must be explained. **a) TEACHING** |
| Local Authority and School | Type of School \* | Numberon roll | AgeRange | State proportion if part-time | Status/grade of posts, subjects, age groups taught  | Inclusive period |
| From | To |
| D | M | Y | D | M | Y |
|  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |

\* eg Mixed, Girls, Boys, Secondary Modern, Grammar, Comprehensive, Junior, Infant, Nursery

|  |
| --- |
| **b) NON-TEACHING including periods not accounted for in previous sections** (including service in HM Forces; Industry – state responsibilities and reason for leaving) |
| Employer | Post held | Responsibilities/Duties | Reason for leaving | Inclusive period |
|  |
| From | To |
| D | M | Y | D | M | Y |
| …… |  |  |  |  |
|  |  |  |  |  |
| …… |  |  |  |  |

|  |
| --- |
| **6. EDUCATION AND QUALIFICATIONS** Details of all courses studied including those NOT completed successfully must be given. If part-time study, state and give details throughout.**a) SECONDARY SCHOOL/COLLEGE** |
| Details of Secondary School/College | From | To | EXAMINATION RESULTS |
|  |  | Examining Body | Subjects | Grade/Result | Date |
|  |  |  |  |  |  |  |

|  |
| --- |
| **b) FURTHER AND HIGHER EDUCATION** |
| University, Polytechnic, College or Dept or Inst or Education | FROM | TO | FT/PT | Degree obtained | Pass/Honours | SUBJECTS |
|  |  | Main | Subsidiary |
|  |  |  |  |  |  |  |  |

|  |
| --- |
| **7. DETAILS OF RELEVANT IN-SERVICE COURSES ATTENDED (INCLUDING DATES AND PROVIDERS)** **DURING THE PAST 3 YEARS** |

|  |
| --- |
| **8. OTHER RELEVANT INFORMATION** eg hobbies, leisure interests, activities not already mentioned and to especially to explain any gaps in employment or educational history above |
|  |

|  |
| --- |
| **9. DISABILITY**  |
| Do you consider that you have a disability?  If yes, please state disability \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| **10. ILLNESS** |
| Number of working days missed through illness in the past 12 months Please state reasons \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| **11. REHABILITATION OF OFFENDERS ACT 1974** |
| The post you are applying for involves access to children and is exempt from the Rehabilitation of Offenders Act 1974. Your employment is subject to satisfactory enhanced Disclosure and Barring Service check with barred list check and is subject to the requirements set out in the Education (Prohibition from Teaching or Working with Children) Regulations 2003 (as amended).  You are required to inform us immediately if you are the subject of a police investigation or receive any conviction or caution. Should you fail to do so, or should you provide incorrect information, the Lycee reserves the right to terminate your employment without notice. If you have nothing to declare, please write ‘NONE’ below.

|  |  |  |
| --- | --- | --- |
| **Nature of Offence** | **Date** | **Sentence** |
|  |  |  |
|  |  |  |

 |

|  |
| --- |
| **12. REFERENCES** |
| Please give the names of two referees (these should be persons of appropriate standing with direct knowledge of your professional work and should include your present employer) |
| **A**NAME ADDRESS POSTCODE  | STATUS : TELEPHONE NUMBER: FAX NUMBER: EMAIL ADDRESS :  |
| **B** NAME  ADDRESS  POSTCODE  | STATUS TELEPHONE NUMBER  FAX NUMBER :EMAIL ADDRESS  |

|  |
| --- |
| **13. DECLARATION**  |
| To the best of my knowledge the information on this form is correct. I understand that by canvassing the Governors of the establishment for which the application is being made, giving false information or omitting to give information could disqualify my application, or, if appointed, could lead to my dismissal.SIGNED …………………………………………………………… DATE …………………………… |

**ADDITIONAL DOCUMENTS REQUIRED WITH THIS APPLICATION FORM:**

**- for European Union citizens: a copy of a passport or identity card**

**- for Non European Union citizens: a copy of a passport (the page showing the passport number and the pages with the photograph) and a work permit/visa.**