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| **Application for Teaching Post** |
| **Please complete electronically and return via email to; astpaul@strathmore.richmond.sch.uk** |

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| **Position Applied for:** | | | | | **Job Ref No:** | |
| **School:** | | | | | **Closing Date:** | |
| 1. **Personal Details** | | | | | | |
| Title: | Forename: | | | Surname: | | |
| National Insurance No: | | | | Date of Birth: | | |
| DFE Teacher Ref No: | | Date of Recognition: | | | | |
| Newly Qualified Teacher (N.Q.T) OR Completing Teacher Training | | | | | | |
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| Permanent Address:  Post Code: |  | | | | | |
| Email Address: |  | | | | | |
| Mobile Phone No: |  | | Home Phone No: | | |  |
| Work Phone No: |  | |  | | | |
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| **ASYLUM AND IMMIGRATION:**  Before you commence employment you **must** provide evidence of your right to work in the United Kingdom. Original identification documents verifying your right to work in the United Kingdom will be checked and a photocopy taken.  If your application is successful and you commence employment, the copy of your identification documents will be retained on your personnel file under regulations governed by the Immigration, Asylum and Nationality Act. | | | | | | |
| **Are you eligible to work in the United Kingdom:** **YES**  **NO** | | | | | | |
| Do you require a work permit: **YES**  **NO** | | If **YES** when does your current permit expire: | | | | |
| **OTHER INFORMATION:**  Are you a relative or partner to any employee, Trustee, member of The Auriga Academy Trust or governor at Clarendon School or Strathmore School?: **YES**  **NO** | | | | | | |
| Name: | | Position: | | | | |
| Relationship: | |  | | | | |
| Please state how you heard of this vacancy *(e.g. TES, Eteach, Guardian)*: | | | | | | |
| **Successful applicants will be subject to a Disclosure and Barring Service check.** | | | | | | |

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| 1. **Employment History** | | | | | | | | | | | | | | | | | | |
| Are you currently employed by The Auriga Academy Trust? **YES**  **NO**  If **YES** please provide details: | | | | | | | | | | | | | | | | | | |
| School: | | | | | | | | | | | Campus: | | | | | | | |
| Job Title: | | | | | | | | | | | | | Start Date: | | | | | |
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| **Current or Most Recent Employer** | | | | | | | | | | | | | | | | | | |
| Employer Name: | | | | | | | | | | Employer Address:  Post Code: | | | | | | | | |
| Job Title: | | | | | | | | | | | | | | | | | | |
| Date Appointed: | | | | | | | Date of Leaving: | | | | | | | Notice Required: | | | | |
| Grade/ Pay Scale: | | | | | | | | | | SEN Allowance: | | | | | | | | |
| TLR Allowance: | | | | | | | | | | Total Annual Salary: | | | | | | | | |
| Reason for Leaving: | | | | | | | | | | | | | | | | | | |
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| **Previous Employment** *Please provide details of all previous employment in chronological order (most recent first)* | | | | | | | | | | | | | | | | | | |
| **From**  (dd/mm/yyyy) | | **To**  (dd/mm/yyyy) | | | **Name of Employer and Nature of Business** | | | | | | | **Position Held and Grade** | | | | | **Reason for Leaving** | |
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| **Gaps in Employment History from Age 18** *Please give details* | | | | | | | | | | | | | | | | | | |
| **From**  (dd/mm/yyyy) | | **To**  (dd/mm/yyyy) | | | **Details** | | | | | | | | | | | | | |
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| 1. **Education (higher)** | | | | | | | | | | | | | | | | | | |
| **List all higher qualifications including degrees and post graduate qualifications** | | | | | | | | | | | | | | | | | | |
|  | | | **Dates** | | | | | **Qualifications Awarded** | | | | | | | | | | **Date of Award** |
| **University** | | | **From**  (mm/yy) | **From**  (mm/yy) | | | | **Degree** | **Subject** | | | | **Class** | | **Division** | | |  |
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|  | | |  |  | | | | **PGCE** | **Main Subject** | | | | **Second Subject** | | **Key Stages** | | |  |
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| 1. **Education (school/ college)** | | | | | | | | | | | | | | | | | | |
| **Date** | **A-level or other** | | | | | **Subject** | | | | | | | | | | **Results/ Grade** | | |
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| 1. **Education (secondary)** | | | | | |
| **Date** | **GCSE or other** | **Subject** | | | **Results/ Grade** |
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| 1. **Other Qualifications Gained and relevant INSET** | | | | | |
| *Please list in chronological order (most recent first)* | | | | | |
| **Date** | **Course** | | **Organising Body** | **Qualification** | |
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| 1. **Outside Interests/ Activities**   *State briefly what your main leisure interests are, particularly if they are relevant to teaching.* | | | |
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| 1. **References**   *Please give the full details of two referees one of whom should be your present/ most recent employer. The other should be able to vouch for your professional work, relatives or friends are* ***NOT*** *acceptable.*  ***PLEASE ENSURE YOU PROVIDE A VALID EMAIL ADDRESS*** | | | |
| **Name:** | | **Name:** | |
| **Job Title:** | | **Job Title:** | |
| **Organisation:** | | **Organisation:** | |
| **Address:**  **Post Code:** | | **Address:**  **Post Code:** | |
| **Telephone:** | | **Telephone:** | |
| **Email:** | | **Email:** | |
| Please note that we will be seeking references prior to interviews. | | | |
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| 1. **Disclosures**   Please give details of any conviction(s) (spent, unspent, criminal or pending criminal charges(s)) including convictions, cautions, reprimands or warnings received at any time. No conviction is ever 'spent' for the purposes of employment at a school. This includes being placed on the 'barred list' and infringements for driving and insurance. | | | |
| Have you ever been convicted of a criminal offence or received a caution, reprimand, warning or been placed on a barred list (including any given before the age of 18)?: **YES**  **NO**  **If YES** **please attach details in a sealed envelope, including the offence and the date.**  *Because of the nature of the work you are applying, this post is exempt from the provisions of Section 4 (ii) of the Rehabilitation of Offenders Act, 1974 by virtue of the Rehabilitation Act, 1974 (Exceptions) Order, 975 and you are not therefore entitled to withhold information about convictions which for other purposes are 'spent' under the provisions of act and, in the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action by the school.* | | | |
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| 1. **Medical Information** | | | |
| Note; A successful candidate will complete an Occupational Health Work Health Assessment Questionnaire and may be asked to attend a medical examination. | | | |
| **Do you consider yourself to have a disability:**  **YES**  **NO** | | | |
| Is there anything we need to know about your disability in order to offer you a fair selection interview: **YES**  **NO**  **If YES please provide details:** | | | |
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| 1. **Declaration** | | | |
| I certify that the information given above and overleaf is correct to the best of my knowledge. I understand that an offer of appointment will be subject to satisfactory references, DBS clearance, proof of identity and right to live and work in UK, medical checks and verification of relevant qualifications.  I give consent for personal information provided as part of this application to be held in accordance with the Data Protection Act 1988.  I accept that if any of the enclosed information is found to be untrue or misleading after my appointment, I may be liable for dismissal without notice. | | | |
| **Print Name:** | **Signature:** | | **Date:** |
|  | | | |
| 1. **Letter of Application**   Please address each and every point of the Person Specification in this section. Failure to address any or all points may result in the application not being shortlisted for interview.  **Do not attach a CV or additional documentation** | | | |
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| **Monitoring Information** | | | | |
| The Auriga Academy Trust wants to meet the aims and commitments set out in its equality policy. This includes not discriminating under the Equality Act 2010, and building an accurate picture of the make-up of the workforce in encouraging equality and diversity.  The information provided will not be used for selection purposes and will stay confidential. It will be stored securely and will not be kept as part of an individual's personnel records. | | | | |
| **Gender:** | Male  Female  Non-binary  Prefer not to say  If you prefer to use your own term, please specify: | | | |
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| **Disability:** | Do you consider yourself to have a disability or health condition: **YES**  **NO** | | | |
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| **Ethnicity:**  Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong.  Please tick the appropriate box | | | | |
| White- British | |  | Asian/ Asian British- Pakistani |  |
| White- Irish | |  | Asian/ Asian British- Bangladeshi |  |
| Any other white background | |  | Chinese |  |
| Mixed White and Black Caribbean | |  | Any other Asian background |  |
| Mixed White and Black African | |  | Black/ Black British- Caribbean |  |
| Mixed White and Asian | |  | Black/ Black British- African |  |
| Any other mixed background | |  | Any other Black/ African/ Caribbean background |  |
| Asian/ Asian British- Indian | |  | Arab |  |
| Any other ethnic group | |  | Ethnicity not provided |  |
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| **Religion:** | | | | |
| No religion or belief | |  | Buddhist |  |
| Christian | |  | Hindu |  |
| Jewish | |  | Muslim |  |
| Sikh | |  | Other religion or belief |  |
| Prefer not to say | |  |  |  |