

## Application form for Post at Harlow Academies

NET Academies Trust is committed to safeguarding children and young people  
All post holders are subject to a satisfactory enhanced Disclosure and Barring Service check

Please ensure that you complete all sections of Part 1 and Part 2 of the application.

**Please e-mail the application form to Jenny Taaffe at [operationsmanager.harlow@netacademies.net](mailto:operationsmanager.harlow@netacademies.net)**

All applications received will be receipted.

Vacancy Job Title	
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### PERSONAL DETAILS

Title	
All forenames	
Surname or family name	
All previous surnames	
Current Address	
Postcode	
Resident at this address since [date]	
Home telephone number	
Mobile telephone number	
Email address	
National Insurance Number	
Do you have qualified Teacher Status?	
DfE reference number (if relevant)	
Do you have the right to work in the UK?	
Employment restrictions (if applicable)	
Are you related to or have a close personal relationship with any pupil, employee, or governor?	

### PRESENT / LAST APPOINTMENT

Name address and telephone number of employer	
Job title	
Date appointed to current post	
Current salary	
Date available to begin new job	

Responsibilities and key achievements	
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**FULL CHRONOLOGICAL HISTORY** Please provide a full history in chronological order starting with the most recent 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 ALL 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 applica ble	F/T or P/T	Responsibilities  Any key achievements	Dates				Reason for leaving
					From		To		
					Mth	Yr	Mth	Yr	

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Please enclose a continuation sheet if necessary

**Additional Employment:**

Applicants with more employment history, please include it on the additional information box below:

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**SECONDARY SCHOOL/COLLEGE**

Name of School/College	From	To	Qualifications Gained with Dates and Grades

**UNIVERSITY/COLLEGE EDUCATION**

Name and Addresses of University, 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

**PROFESSIONAL COURSES ATTENDED** Please list relevant courses attended in the past 3 years.

Subject	Organising Body	Date(s)	Duration

**PERSONAL STATEMENT**

Please detail why you believe you are suitable for this role, giving examples of relevant experience, skills and attributes:

## REFEREES

Give here details of two people to whom reference may be made. The first referee should normally be your present or most recent line manager or equivalent person. If you are not currently working with children please provide a referee from your most recent employment involving children. 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	

Please indicate if we can contact your referees prior to interview

Yes:

☐
☐

## **PART 2**

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.

### **EQUAL OPPORTUNITIES MONITORING**

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

Please mark the relevant box		X
White	British	
	Irish	
	Other White	
Mixed	White and Black Caribbean	
	White and Black African	
	White and Asian	
	Other Mixed	
Asian or Asian British	Indian	
	Pakistani	
	Bangladeshi	
	Other Asian	
Black or Black British	Black Caribbean	
	Black African	
	Other Black	
Chinese or other ethnic group	Chinese	
	Other ethnic group	
Do not wish to be recorded		

### **DISABILITY**

The Disability Discrimination Act 1995 defines a disability as a physical or mental impairment which has a substantial and long term adverse effect on your ability to carry out normal day to day activities. An amendment in 2005 means certain conditions are also covered at the point of diagnosis, not when they begin to affect day to day activities.

Do you consider yourself to be disabled?

Yes: ☐

No: ☐

Are there any considerations in relation to any of the information that you have provided in this form that we should take into account for making interview or assessment arrangements?

## COMPULSORY DECLARATION OF ANY CONVICTIONS, CAUTIONS OR REPRIMANDS, WARNINGS OR BINDOVERS

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 mark 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.

## 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 dismissal if I am in post. I understand and accept that checks may be carried out to verify the contents of my application form.

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Signature of Candidate

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Date

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Print Name

If completed electronically, candidates will be required to sign the form in person if called for interview.