### HAMPSHIRE COUNTY COUNCIL CONFIDENTIAL

**TEACHING APPLICATION FORM**

**Please use black ink/ print when completing this form**

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|  |
| 1. Application for the post of |  | Hhh  | (as advertised) |
|  |
|  at (School/ establishment) |  | 9 |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| **2.** Last Name  |  |  First Names |  |
|  |
|  Title  |  | Any Previous Last Names |  |  |  | (as advertised) |
|  |
|  Address |  Post Code: |
|  |
|  |
|  |
|  Daytime Tel No. |  |  Evening /Mobile Tel No. |  |
|  |
|  E-mail |  |
|  |

**3. Education and qualifications** (If part-time study, state and give details throughout). N.B. details of courses studied and not completed successfully must also be given.

**(a)** **Secondary / Further Education**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of school/college | Dates | Subject andQualification | Grade and dateawarded |
| From | To |
|  |  |  |  |  |  |
|  |  |

**(b) Higher Education and Courses leading to other relevant qualifications**

Such as those leading to qualified status or graduate status and to membership of professional institutions.

|  |  |  |  |
| --- | --- | --- | --- |
| Higher Education:Establishments attended | Dates | Qualification obtained anddate of award | Subjects |
| From | To | Main | Subsidiary |
|  |  |  |  |  |  |
| HCC_Black_1 |

|  |  |
| --- | --- |
| **4. Present appointment**School/College/Establishment |  |
|  |  |  |
| Local Authority (if applicable) |  |  Number on Roll |  |
|  |  |  |
| Post Held (specify any additional allowances) |  |
|  |  |  |
| (If part-time, please give details) |  |  Date appointed |  |
|  |  |  |
| Subjects, age groups taught and other responsibilities |  |
|  |  |
| Notice required and / or date available if appointed |  |
|  |
| Current Gross Salary £ |  |
|   |

**5. Previous experience** If part-time appointment please state. A separate curriculum vitae should **not** be enclosed in

 substitution. **A continuous employment history is required from when you left full time education.**

**(a)** **Teaching (most recent employment first)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Local Education Authority and School/College | Type of School  | No.on Roll | Age Range | Status of Post, subjects taught | Reason for Leaving | Inclusive Period(month & year) |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
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**(b)** **Other paid employment (including Service in H.M. Forces, industry). State responsibilities and reasons**

**for leaving. Please indicate details of gaps in employment here.**

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**6a. Statement in support of application.**Please provide evidence of how your experience, skills and abilities are relevant to your suitability for the post advertised and how you meet the requirements of the post and the person specification

Applicants should confine this to two sides of A4. An additional letter is not required.

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**6b. Statement to illustrate how your experience meets the threshold criteria of the school - (relevant only if the post for which you are applying sits on the Upper Pay Range).**Please provide evidence of how your experience, skills and abilities demonstrate that you are ‘*highly competent*’ and have a ‘*sustained*’ impact on teaching and learning across the school.

In addition, you must also illustrate how your experience meets the school’s threshold criteria, which are as follows:

**[insert school criteria]**

Applicants should confine this to one side of A4. An additional letter is not required.

**7. Confidential References (Please ensure referees know this reference is being requested)**

 Names, addresses and status of two referees (one of whom, if employed, must be your present manager e.g. your

 Headteacher). References will be sought on short listed candidates and previous employers may be contacted to verify particular experience or qualifications before interview. Current or previous employers will be asked about disciplinary offences relating to children including penalties that are “time expired” and any child protection concerns.

|  |  |  |
| --- | --- | --- |
| **(1) Present Employer**NameAddressTel No *(inc. STD code)*Fax NoEmail addressOccupation |  | **(2)** NameAddressTel No *(inc. STD code)*Fax NoEmail addressOccupation |
|  |  |  |

**8. Further information**

|  |  |  |
| --- | --- | --- |
| National Insurance No. |  |  |
|  |
| Teacher Reference Number  |  | (7 digit number) |
|  |
| Qualified Teacher Status? | **YES** |  | **NO** |  | Date |
|  |
| Statutory induction year completed? (if qualified after 7 May 1999) | **YES** |  | **NO** |  | Date |
|  |
| Would you require sponsorship (previously a work permit) to take up this post? | **YES** |  | **NO** |  | Date |
|  |
|  |
| Where did you see the advertisement for this post? |  |
|  |  |

**9. Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975**

This post is covered by the **Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975** because it is a post which involves working directly with children or young people. You are therefore required to declare whether you have any criminal convictions (or cautions or bind-overs) including those which are **“spent”**. The amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are 'protected' and are not subject to disclosure to employers , and cannot be taken into account. Guidance and criteria on the filtering of these cautions and convictions can be found on the Disclosure and Barring Service website :

<https://www.gov.uk/government/collections/dbs-filtering-guidance>

**Please complete the following questions, taking into account the DBS filtering guidance**.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you have any convictions, cautions, reprimands or final warnings that are not "protected" as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013) | **YES**  |  | **NO** |  |
|  |
| If Yes, please give details including dates, on a separate sheet, place the sheet in a sealed envelope marked for the attention of the Chair of the shortlisting panel and enclose it with this form. |
|  |
| Are you included in any list of people barred from working with children by the Disclosure and Barring Service (DBS) or the NCTL (National College of Teaching and Leadership)?  | **YES**  |  | **NO** |  |
|  |
| If Yes, please give details including dates, on a separate sheet, place the sheet in a sealed envelope marked for the attention of the Chair of the shortlisting panel and enclose it with this form. |

**PLEASE NOTE;**

* If your application is successful, prior to taking up your post, you will be required to undergo a **Formal Disclosure** process through the **Disclosure and Barring Service** (previously CRB). This will require you to complete a separate DBS application form and to provide a range of more than one piece of documentary evidence of your identity.
* Although a criminal record **involving offences against children** is likely to debar you from appointment of this type of post, the existence of other criminal convictions will not necessarily be a bar to employment.
* Any criminal record information arising out of the disclosure process will be discussed with you before any final decision is made about your employment.
* **It is a criminal offence to apply for or accept a position (paid or unpaid) working with children if you are excluded from such work by virtue of a court order or exclusion by the DBS.**
* Copies of the County Council‘s policy on the employment of ex-offenders, the DBS Code of Practice and the school’s policy on criminal records checks are available on request.
* With effect from 17th June 2013 criminal records certificates will only be issued directly to the applicant.  The Local Authority/your employer will request that you show them your certificate and will record the Disclosure number and issue date and retain this on your personnel record and on its computerised personnel record system in accordance with the Data Protection Act 1998. The Local Authority abides by the DBS Code of Practice and Keeping Children Safe in Education (DfE, 2014) which state that a copy of the DBS Disclosure Certificate may only be retained with the permission of the applicant and shall not be retained for longer than 6 months, in order to comply with the requirements of the Data Protection Act. By signing this application form you give your consent to this.

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**10.** Please state whether, to the best of your knowledge, you are related to a County Councillor, senior member of Hampshire Children’s Services Department, or a governor or senior employee of a school maintained by this Authority. **YES / NO**. If YES, please state the nature of relationship and the name of the County Councillor, senior member of Hampshire Children’s Services Department, governor or senior employee of the school.

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**11.** I understand that if I am appointed, personal information about me will be computerised for personnel / employee administrative purposes in accordance with the Data Protection Act 1998. This may include analysis for management purposes and statutory returns.

In signing this form I give my authority for use of my personal data for these purposes.

I hereby confirm that the information I have given above is true.

Where applicable, I will be subject to the regulations on political restrictions as defined in Local Government and Housing Act 1989.

I understand that, should any of the particulars I provide in this application be found to be false within my knowledge, or should there be any wilful omission of material fact, this may be reported to the Police as well as leading to my application being rejected or the contract being null and void if I have already been appointed.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signature of Candidate |  |  |  Date |  |
|  |

*October 2014*

***CONFIDENTIAL***

**Equalities Monitoring Form**

We would be grateful if you would complete the following in order for us to monitor equalities information and ensure that we are treating all candidates fairly and appropriately.

This information will be treated confidentially and will not be used in any part of the selection process.

|  |  |
| --- | --- |
| **School/ Children’s Centre:** |  |
|  |  |
| **Post applying for:** |  |
|  |  |
| **Name:** |  |
|  |
| **Date of Birth:** |  |  |  |  |  |  |
|  |
| **Gender:** |  | Male |  | Female |
|  |
| **Nationality:** |  | British |  | Irish |
|  |  |  |  |  |
|  |  | Other EU country |  | Other Non EU country |

**Ethnicity:**

Please indicate your ethnic origin:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **A** | **White** | **B** | **Mixed** | **C** | **Asian & Asian British** |
|  | British |  | White & Black Caribbean |  | Indian |
|  |  |  |  |  |  |
|  | Irish |  | White & Black African |  | Pakistani |
|  |  |  |  |  |  |
|  | Other White background \* |  | White & Asian |  | Bangladeshi |
|  |  |  |  |  |  |
|  |  |  | Other Mixed background \* |  | Other Asian background \* |
|  |  |  |  |  |  |
| **D** | **Black & Black British** | **E** | **Chinese or other group** |  |  |
|  | Caribbean |  | Chinese |  | I do not wish to disclose |
|  |  |  |  |  | my ethnic origin to |
|  | African |  | Any other background \* |  | Hampshire County Council |
|  |  |  |  |  |  |
|  | Other Black background \* |  |  |  |  |

|  |  |
| --- | --- |
| **\*** Please indicate any other ethnic background: |   |

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**Sexual Orientation:**

Please indicate your sexual orientation:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Heterosexual  |  | Transsexual |  | Bisexual |
|  |  |  |  |  |  |
|  | Gay |  | Lesbian |  | Other |
|  |  |  |  |  |  |
|  | I do not wish to disclose my sexual orientation to Hampshire County Council |

**Disability**

Disability is described by the Equality Act 2010 as a physical or mental impairment that has a substantial long term adverse effect on an individual's ability to carry out normal day to day activities.

Applications from disabled people are welcome. We will ensure that appropriate support is provided where required, both in the recruitment and selection process, and during employment.

Do you consider yourself to have a disability?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Yes |  | No |  | I do not wish to disclose my disability data to |
|  |  |  |  |  | Hampshire County Council |

**Thank you for completing this form.**

**Please return in a sealed envelope with your application form**

**stating your name, post applying for and the School/ Children’s Centre.**

**The above information will not be shared with the selection panel prior to interview.**

**This information will be retained, confidentially, and used for payroll/ monitoring purposes.**