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| **Job Title** |  | | |  | |
| **Name** |  | | |
| **Address**    **Post Code** |  | | |
| **e-mail** |  | | | **Date of Birth** |  |
| **Contact Numbers Home** |  | **Mobile** |  | **Work** |  |
| **Passport No** |  | | | | |
| **Do you have current & clean Driving Licence** |  | **Driving Licence Number** |  | | |
| **Do you have a current Enhanced CRB?** |  | **Current CRB Number** |  | **Current CRB Date** |  |
| **Dfes No  (If applicable)** |  | **Number of absences exceeding 3 days in the last 3 years due to illness** | |  | |

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| **Present Employer** |  | | | **Telephone No** |  | | |
| **Email address** |  | | |
| **Present Post** |  | | | | | | |
| **Current Responsibilities** |  | | | | | | |
| **Start Date** |  | **Years at post** |  | **Present Salary** |  | **Expected Salary** |  |
| **Reason for leaving/wishing to leave** |  | | | | | | |
| **Notice required by present employer** |  | | | | | | |

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| **Employment History  (***please continue on a separate sheet if necessary***)** | | | | |
| **Dates (Month & Year)** | | **Previous employers (Most recent first-please account for all gaps in employment)** | **Position held and brief description of duties** | **Reason for Leaving** |
| **From** | **To** |
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| **Training and Professional Qualifications from A level onwards** | | | | |
| **Month & Year** | | **Full name and town of College/University** | **Qualifications gained *(include subject of degrees,  teaching qualifications & all grades)*** | **Awarding Body** |
| **From** | **To** |
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| Professional Referees *Please note references will be requested prior to shortlisting. If you do not wish us to contact your employer prior to shortlisting could you state below.**(One must be your current or most recent employer – please state in what capacity the two referees are acting)* | | | |
| --- | --- | --- | --- |
| **Name** |  | **Name** |  |
| **Address** |  | **Address** |  |
| **Capacity/ Relationship** |  | **Capacity/ Relationship** |  |
| **Telephone No** |  | **Telephone No** |  |
| **Email Address** |  | **Email Address** |  |
| **Chase Grammar School reserves the right to contact any previous employer.**  **Please Note: This application form should be accompanied by a letter of application in which you should explain why you are applying for the position. Please concentration how your experience, training and personal qualities match the requirements of the job description and person specification. Chase Grammar School is committed to safeguarding the welfare of children. Applicants must be willing to undergo child protection screening appropriate to the post, including checks with past employers and the Disclosure Barring Service.** | | | |

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| **Are you fit for work? (Please answer yes or no)** |  | |
| **I am not aware of any health problem including physical or psychological or any other disability which may affect my ability to do the job described by you.** | **Signed** | **Date** |

**As part of your employment at Chase Grammar School, we need to request an Enhanced Disclosure and Barring Service background check.**

**We need you to disclose any previous convictions in making the appointment. Please do so in this box.**

***If there are no previous convictions, write none.***

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**Safeguarding Regulations regarding ‘Disqualification by Association’**

**The regulations refer to a person who lives or works in the same household as the employee who works in early years provision (including teachers and support staff working in school nursery and reception classes) and to those who work in later years provision for children who have not attained the age of 8 including before school settings, such as breakfast clubs and after school provision. It also applies to staff who are directly concerned in the management of such early years or later years provision.**

**The following questions refer to any person who lives or works in the same household as the applicant.**

***Please complete the box below.***

|  |  |
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| **Are there details of any order, determination, conviction, or other ground for disqualification from registration under the Childcare (Disqualification) Regulations 2009.  *(Please answer yes or no)*** |  |
| **If yes please provide details of:**  **The date of the order, determination or conviction, or the date when the other ground for disqualification arose.**  **Information about the body or court which made the order, determination or conviction, and the sentence (if any) imposed.**  **A certified copy of the relevant order  (in relation to an order or conviction).** |  |

**Declaration**

**I certify that the enclosed statements are, to the best of my knowledge, correct and understand that my Contract of Employment may depend on their accuracy. False statements which subsequently come to light may result in the termination of employment.**

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**