

**APPLICATION FORM**

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|  Position applied for: |

**SECTION 1 – PERSONAL DETAILS**

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| Title:Dr/Mr/Mrs/Miss | Forename(s): | Surname: |
| Address:Postcode: | Former names: |
| Preferred name: |
| National Insurance Number:  |
| Are you currently eligible for employment in the UK:Yes: □ No: □ Please provide details: |
| Telephone number(s):Home:Work:Mobile:Email:  |
| Are you related to or do you maintain a close relationship with an existing pupil, employee, volunteer or Proprietor of Sompting Abbotts School?Yes: □ No: □ If yes, please provide details. |
| ***FOR OFFICE USE ONLY***Date application received: …………………………….. Date acknowledged: …………………………………….Selected for interview: YES NO Date letter sent: ..…………………………………… References requested: 1) 2) 3) 4) References received: 1) 2) 3) 4) Date offer letter sent: …………………………….. Date acceptance received: ……………………………. |

**SECTION 2 – EDUCATION *Please start with the most recent***

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| Name of School/College/University | Dates of Attendance | Examinations |
| Subject | Result | Date | Awarding Body |
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**SECTION 3 – OTHER VOCATIONAL QUALIFICATIONS, SKILLS OR TRAINING**

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**SECTION 4 – CURRENT/MOST RECENT EMPLOYER**

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| Name:  | Address:  |
| Job title:  | Date started: |
| Brief description of responsibilities: | Date employment ended (if applicable): |
| Do you/did you receive any employee benefits? If so please provide details of these:  | Current salary/salary on leaving: |
| Reason for seeking other employment: |
| Please state when you would be able to take up employment if offered: |

**SECTION 5 – PREVIOUS EMPLOYMENT** (and/or activities since leaving secondary education)

*Please continue on a separate sheet if necessary*

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| Dates | Name and address of employer | Position held and/or duties | Reason for leaving |
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SECTION 6 – PERSONAL STATEMENT

Please explain your reasons for wanting to take up the post and the qualities that you think you would bring to the School.

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**SECTION 7 – CRIMINAL RECORD**

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| An offer of employment is conditional upon the School receiving a satisfactory Enhanced Disclosure from the DBS. If you are successful in your application you will be required to complete a Disclosure and Barring Service application form. Any information disclosed will be handled in accordance with the Code of Practice published by the Disclosure and Barring Service (a copy of which is available from the School on request).The School is exempt from the Rehabilitation of Offenders Act 1974 and therefore all convictions, cautions, reprimands and final warnings (including those which would normally be considered “spent” under the Act) must be declared. If you have a criminal record this will not automatically debar you from employment. Instead, each case will be assessed fairly by reference to the School’s objective assessment procedure (a copy of which is available from the School on request).Have you been convicted by the courts of any criminal offence? Yes □ No □Is there any relevant court action pending against you? Yes □ No □Have you ever received a caution, reprimand or final warning from the police? Yes □ No □If ‘YES’ to any of the above, please provide details on a separate sheet and send this in a sealed envelope marked “confidential” with your Application Form. |

**SECTION 8 – REFERENCES**

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| Please supply the names and contact details of at least two people who we may contact for references. One of these must be your current or most recent employer. Neither referee should be a relative or someone known to you solely as a friend. The School intends to take up references from all shortlisted candidates and any offer of employment will be conditional upon the School receiving satisfactory references. |
| Referee 1 | Referee 2 |
| Name:Organisation:Address:OccupationTelephone No:Email address:**May we contact prior to interview? Yes No** | Name:Organisation:Address:OccupationTelephone No:Email address:**May we contact prior to interview? Yes No** |
| Referee 3 | Referee 4 |
| Name:Organisation:Address:OccupationTelephone No:Email address:**May we contact prior to interview? Yes No** | Name:Organisation:Address:OccupationTelephone No:Email address:**May we contact prior to interview? Yes No** |

**SECTION 9 – HEALTH**

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| In accordance with the guidance published by the DfES any offer of employment made by the School will be conditional upon the School verifying the successful applicant’s medical fitness for the role. Therefore, if your application is successful, you will be required to complete a medical questionnaire the responses to which will be assessed by the School before any offer of employment is confirmed. There may be circumstances when it will be necessary for the School to be given access to your medical records and/or for you to be referred to a specialist clinician. |

**SECTION 10 – RECRUITMENT**

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| It is the School’s policy to employ the best qualified personnel and to provide equal opportunity for the advancement of employees including promotion and training and not to discriminate against any person because of their race, colour, national or ethnic origin, sex, sexual orientation, marital status, religion or religious belief, disability or age. All new posts within the School are subject to a probationary period.The School is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.If your application is successful, the School will retain the information provided in this form (together with any attachments) on your personnel file. If your application is unsuccessful, all documentation relating to your application will normally be confidentially destroyed after 6 months. However, please indicate below if you would like the School to retain your details on file so that you can be notified of future vacancies which may be of interest to you.Would you like the School to retain your details if your application is unsuccessful? Yes □ No □ |

**SECTION 11 – DECLARATION**

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| * **I confirm that the information I have given on this application form is true and correct to the best of my knowledge.**
* **I confirm that I am not on List 99, disqualified from work with children or subject to sanctions imposed by a regulatory body.**
* **I confirm that I am living legally in the UK and that I have permission to work up to the number of hours which this appointment requires.**
* **I understand that providing false information is an offence which could result in my application being rejected or (if the false information comes to light after my appointment) summary dismissal and may amount to a criminal offence.**
* **I agree to cooperate with any request by the School to attend a medical assessment.**
* **I consent to the School processing the information given on this form, including any ‘sensitive’ information, as may be necessary during the recruitment and selection process and that this may involve making such information available to third parties in order for the School to comply with its legal and/or contractual obligations.**

Signature: Date: (If sending via email please type your name) |