|  |
| --- |
| **1. POST DETAILS** |
| Post applied for:  | Post ref:(if applicable)  |

|  |
| --- |
| **2. PERSONAL DETAILS** |
| Title:  | First Name:  | Middle Name:  | Surname:  |
| Other names, including surname at birth:  | Used until (month; year) |
| Place of birth:  | Contact Telephone Number (home):  | Contact Telephone Number (mobile):  |
| Nationality:  |
| Current address including postcode:  | National Insurance Number:  | Email:  |
| Previous addresses (last 5 years): | Resident at this address until: (m/y) | Please only answer the questions below if they are a requirement on the Person Specification for this post |
| Do you have a current full Driving License? | **YES** [ ]  **NO** [ ]  |
| Do you have use of a vehicle? Would you be willing to commute between sites?  |  **YES**  [ ]  **NO** [ ] **YES** [ ]  **NO** [ ]  |
| Have you ever lived or worked abroad? If so, where have you lived? If so, where have you worked?  |
| Period of foreign residency: From: To:  |

|  |
| --- |
| **3. EDUCATION** |
| Qualifications gained or pending. Please state subject(Please be prepared to provide evidence at interview) | Grade | Date Achieved(MM/YYYY) | School/College/University |
|  |   |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| **4. TRAINING / AWARDS** |
| Organising body  | Date Achieved(MM/YYYY) | Brief Description of course  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
| **5. PRESENT EMPLOYER** |
| Job Title:  | Address:  | Reason for leaving: |
| Organisation name: | Salary: | Employment Dates:Start: End: |

|  |
| --- |
| **6. EMPLOYMENT HISTORY** |
| Job Title:  | Employer:  | Dates of employment | Reason for Leaving |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| **7. GAPS OF EMPLOYMENT**  |
| Dates of Gap:  | Reason for Gap:  |
|  |  |
|  |  |

|  |
| --- |
| **8. SUMMARY OF EXPERIENCE, SKILLS, KNOWLEDGE AND COMPETENCIES** |
| Please provide us with information of your relevant experience, skills, knowledge and competencies which you feel make you the best person for the job. Always give examples of things you have done in your work/home life to fulfill the Person Specification.  |
| **9. REFEREES** |
| Name:  | Name:       |
| Address:  | Address:       |
| Postcode:  | Postcode:  |
| Email Address:  | Email Address:  |
| Telephone Number:  | Telephone Number:  |
| Title/ Position:  | Title/ Position:  |
| Relationship to applicant:  | Relationship to applicant:  |
| This should be your last two professional employers |

|  |
| --- |
| **10. DISABILITY/ HEALTH CONDITIONS** |
| Lewis Charlton School encourages people with disabilities to apply for jobs.**The Equality Act 2010 defines disability as:***‘A physical or mental impairment which has a substantial and long-term adverse effect on the ability to carry out normal day-to-day activities.’***I consider myself to be: Disabled Non-Disabled**  |

|  |
| --- |
| **11. SELF-DECLARATION** |
| The role you are in or have applied for involves frequent or regular contact with or responsibility for children, therefore you will also be required to provide a valid DBS (Disclosure and Barring Service) certificate, which will provide details of criminal convictions. This may also include a barred list check depending on the nature of the role (see national guidance about eligibility for DBS checks).

|  |  |
| --- | --- |
| Have you ever been known to any children’s services department or to the police as being a risk or potential risk to children?  | Yes / No |
| If yes, please provide further information: |
| Have you been the subject of any disciplinary investigation and/or sanction by any organisation due to concerns about your behaviour towards children?  | Yes / No |
| If yes, please provide further information: |
| 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 (Amended) 2013? <http://www.justice.gov.uk/downloads/offenders/rehabilitation/rehabilitation-offenders.pdf> | Yes / No |
| If yes, please provide further information to include date, court and nature of offence: |
| **Confirmation of declaration** (tick box below) |
| **[ ]**  | I agree that the information provided here may be processed in connection with recruitment purposes and I understand that an offer of employment may be withdrawn or disciplinary action may be taken if information is not disclosed by me and subsequently come to the organisation’s attention.  |
| **[ ]**  | I am happy to perform a DBS check and disclose any information to Lewis Charlton School |
| **[ ]**  | I understand that the information contained on this form, the results of the DBS check and information supplied by third parties may be supplied by the organisation to other persons or organisations in circumstances where this is considered necessary to safeguard children.  |
| **[ ]**  | I agree to inform the organisation within 24 hours if I am, or anyone living in my household is, subsequently investigated by any agency or organisation in relation to concerns about my behaviour towards children or young people OR violent or sexual offences against an adult. |
| **[ ]**  | I confirm myself to be medically fit to carry out the duties associated with my role, and if appropriate in working with children. |

The school needs to be aware of the following medical condition/s which do not prevent me from working with children. (For the purposes of this declaration it is vital that applicants declare all conditions including emotional and mental health difficulties and illnesses, whether current or historical:

|  |
| --- |
| **Signature of candidate:** |
| **Print name:** |
| **Date:** |

 |

*Please e-mail your completed application form to:*

recruitment@lewischarltongroup.org.uk