**Glebe School**

Hawes Lane, West Wickham, BR4 9AE

Headteacher: Mr I Travis

Telephone: 020 8777 4540

Fax: 020 8777 5572

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**Application Form for Teaching Appointments**

**Post: Assistant Headteacher**

**1. Personal details** (BLOCK CAPITALS)

|  |  |
| --- | --- |
| Title: | Surname: |
| First name/s: | Date of birth: |
| Previous surname if relevant: |
| Address: |
| Town or City: | Post code: |
| Telephone No. (home) | e-mail  |
| Telephone No (mobile) | Date of birth: |
| DfE Teacher Number: | National Insurance No: |
| Do you require a work permit to work in the UK? | YES / NO |
| If yes and applicable, when does your permit expire? (month, year) |  |
| Are you recognised by the DfE as a qualified teacher in the UK? | YES / NO |
| If yes, please give date of recognition (month, year) |  |
| Have you successfully completed a period of probation/statutory induction as a qualified teacher in the country as required by the DfE? | YES / NO |
| If yes, please give date of completion (month, year) |  |
| Teaching experience (years): |  |

**2. Teacher training** – *please give details*

|  |
| --- |
| Name of Teacher Training Institution: |
| From (month, year): | To (month, year): |
| Age range you are trained to teach: |
| Qualification obtained: |
| Subject you are trained to teach: |
| Additional subjects which you are able to teach: |
| Additional languages spoken: |

**3. Other education, qualifications and training (excluding initial teacher training)**

|  |  |  |  |
| --- | --- | --- | --- |
| Title and subjects | Certificate/Qualifications Grade/Class *(Please specify)* | School, College or University *(give address)* | Reason for leaving *(if applicable)* |
|  |  |  |  |

**4. Current or most recent post (including initial teacher training placement)**

|  |
| --- |
| Full name and address of school/college, or employer: |
| Type of School: | Number of students: |
| Local Education Authority: |
| Position held: |
| Scale/grade/MPS: | Full-time/Part time: |
| Dates from/to: |
| Present salary (give details of special allowances): |

**5. Previous teaching/employment experience**

**(Please start with most recent and continue on a separate sheet if necessary)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of employer | Type of school/Nature of business | From | To | Post held | Salary/Scale on leaving |
|  |  |  |  |  |  |

**6. Your supporting statement**

As part of your application you are requested to set out relevant information in support of your application. Use this section to set out your reasons for applying for this post and show how your qualifications, experience, skill and qualities support your application. (Continue on separate sheets as required)

|  |
| --- |
|  |

**7. References**

Please give the names of two people from whom confidential references may be obtained. They should have knowledge of your professional capacity and one must be your most recent employer. **Your referees will be contacted if you are called for interview**.

|  |  |
| --- | --- |
| Referee: | Referee: |
| Position: | Position: |
| Employer/School name: | Employer/School name: |
| Address: | Address: |
| Post Code: | Post Code: |
| Tel No: | Tel No: |
| E-mail: | E-mail: |
| Professional relationship: | Professional relationship: |
| Period known (years): | Period known (years): |

**8. Additional Information**

**Superannuation**

|  |  |
| --- | --- |
| Do you contribute to the Teachers’ Pension Scheme? | YES / NO |
| Or other superannuation (give name): |
| If part-time, have you made a positive election to join the Teachers’ Pension Scheme? | YES / NO |

**Disability**

|  |  |
| --- | --- |
| Do you consider yourself to have a disability? | YES/NO |
| If yes, please give details if you are aware of any equipment or adaptations that will assist you: |
| Please give details if you will require any assistance if called for interview. |

**Disclosure of relationship**

|  |  |
| --- | --- |
| Are you related to, or have you a close personal relationship with any member of staff, or member of the governing board of the Specialist Learning Trust or Glebe School. | YES / NO |
| If yes, please provide details: |

**9. Protection of children**

Disclosure of any criminal background is required. Because of the nature of the work, teaching in the UK is exempt for the provision of Section 4(2) of the Rehabilitation of Offenders Act 1974 (Exceptions) (Amendment) Order 1986, and therefore applicants are not entitled to withhold information about convictions which for other purposes are spent under the provisions of the Act. Offers of employment will also be dependent on completion of a satisfactory police check. Disclosure of a criminal background will not necessarily bar you from any appointment.

|  |  |
| --- | --- |
| Have you ever been convicted of a criminal offence? | YES / NO |
| If yes, please give details: |
| Date: | Offence: |
| Sentence: |
| Please give details of your police check with the Disclosure and Barring Service: |
| Police check date: | DBS Number: |

**9. Data Protection**

Under the terms of the Data Protection Act 1998, the information you provide on this form will only be used by the Academy Trust for the purpose of assessing your suitability for employment, for monitoring policies and procedures, and for personal management purposes.

For any position that you apply for, if unsuccessful, this information may be retained on file for 6 months. The information may be used in internal proceedings to consider a complaint about the selection process and/or to defend against a legal challenge to the fairness of the selection process from any interested party. The information you provide to us on this form may also be used in the prevention and detection of crime and fraud, or shared with other bodies administering public funds solely for this purpose.

**10. To be signed by all applicants**

I confirm that, to the best of my knowledge, the information contained on this form is true and correct. I am in possession of the certificates which I claim to hold, and understand that wilful falsification may result in dismissal if I am appointed. I understand that any offer of employment will be subject to satisfactory medical and police checks.

Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**11. Recruitment monitoring**

The Academy is committed to Equal Opportunities. The aim of its policy is to ensure that no job applicant or employee is treated unfairly on the grounds of age, colour, national origins, nationality, race, disability, family commitments, gender, marital status, membership or otherwise of a trade union, religion or sexual orientation.

Without accurate data on the composition of our workforce and on job applicants we are unable to monitor the effectiveness of our policies and procedures. Therefore we ask for your co-operation in completing the monitoring section of this form. This information will be used for statistical purposes only and will not be reproduced in a way that enables individuals to be identified. All information supplied by applicants is treated in the strictest confidence.

Job Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Surname:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Gender:** Male / Female / Prefer not to say

**Ethnic group**

|  |  |
| --- | --- |
| **Asian or Asian British** | **Black or Black British** |
|  | Bangladeshi |  | African |
|  | Indian |  | Caribbean |
|  | Pakistani |  | Black other *(please write in)* |
|  | Asian Other *(please write in)* |  |  |
|  |  |
| **Mixed** | **White** |
|  | White and Asian |  | British (English, Welsh, Scottish) |
|  | White and Black African |  | Irish |
|  | White and Black Caribbean |  | European |
|  | Mixed other *(please write in)* |  | White Other |
|  |  |
| **Chinese or other ethnic group** | **Prefer not to say** |
|  | Chinese |  | Please tick |
|  | Other *(please write in)* |  |  |

**Age**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 16 - 17 |  | 18 - 21 |  | 22 - 30 |  | 31 - 40 |  | 41 - 50 |  |
|  |  |  |  |  |  |  |  |  |  |
| 51 - 60 |  | 61 - 65 |  | 66 - 70 |  | 71+ |  | Prefer not to say |  |

**Disability**

The Equality Act 2010 defines a disability as ‘a physical or mental impairment, which has a substantial and long-term adverse effect of a person’s ability to carry out normal day to day activities’. An effect is long-term if it has lasted, or is likely to last, more than 12 months.

* I do consider myself to have a disability
* I do not consider myself to have a disability
* I used to have a disability but have now recovered
* Don’t know
* Prefer not to say

**12. Media monitoring**

Please indicate how you became aware of the post by ticking the appropriate box

* Bromley website
* Other Local Authority website (*please specify*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)
* National Newspaper
* Times Educational Supplement (TES) paper or website
* Internal vacancy list
* Word of mouth
* Other (*please specify*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)