**Shireland Collegiate Academy Trust is committed to safeguarding and promoting the welfare of children, young people and expects all staff and volunteers to share this commitment.**

Successful applicants will be required to undertake an Enhanced Disclosure from the Disclosure and Barring Service (DBS), for which proof of identity is required.

# **JOB APPLICATION FORM**

# **VACANCY DETAILS**

|  |  |
| --- | --- |
| **Position Applied For** |  |

1. **PERSONAL DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| **First Name(s)** |  | **Surname** |  |
| **Previous Name(s)** |  | **Title** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Home Address** |  | | **Post Code** |
| **Correspondence address, if different** |  | |  |
| **Telephone Numbers** | **Daytime** | **Evening** | **Mobile** |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date of Birth** |  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| **Email Address** |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **National Insurance No.** |  |  |  |  |  |  |  |  |  |

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| --- | --- | --- |
| **Do you have the Right to Work in the UK?** | **Yes:** | **No:** |

*Original identification documents verifying your right to work in the UK will be requested, checked and a copy taken. Should you commence employment the copy of your documents will be retained on your personal file.*

1. **EDUCATION DETAILS (SECONDARY – EARLIEST FIRST)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Dates**  **From To** | | **Name of School** | **Subject** | **Type of Exam** | **Grades** | **Date Gained** |
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1. **EDUCATION DETAILS (FURTHER/HIGHER EDUCATION – EARLIEST FIRST)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Dates**  **From To** | | **Institution** | **Level of Qualification** | **Class Obtained** | **Date Gained/**  **Expected** |
|  |  |  |  |  |  |
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1. **EXPERIENCE – CURRENT, PREVIOUS CAREER AND OTHER**

Please complete the following starting with your current employment and include all employment. Any employment with Supply Agencies must show the Agency as the employer and not the school/company where the work was

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Dates**  **From To** | | **Employers name and Address** | | **Position Held** | **Salary** | **Hours Worked** |
|  |  |  | |  |  |  |
| **Responsibilities – indicate type and size of school, subjects and ages taught** | | |  | | | |
| **Reason for leaving/reason for break in employment** | | |  | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Dates**  **From To** | | **Employers name and Address** | | **Position Held** | **Salary** | **Hours Worked** |
|  |  |  | |  |  |  |
| **Responsibilities – indicate type and size of school, subjects and ages taught** | | |  | | | |
| **Reason for leaving/reason for break in employment** | | |  | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| **Dates**  **From To** | | **Employers name and Address** | | **Position Held** | **Salary** | **Hours Worked** |
|  |  |  | |  |  |  |
| **Responsibilities – indicate type and size of school, subjects and ages taught** | | |  | | | |
| **Reason for leaving/reason for break in employment** | | |  | | | |

1. **IN SERVICE TRAINING/PROFESSIONAL DEVELOPMENT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Dates**  **From To** | | **Organising Body** | **Course Title** | **Length of Course** |
|  |  |  |  |  |
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1. **ARRANGEMENTS FOR INTERVIEW**

|  |  |  |
| --- | --- | --- |
| **If you have a disability, are there any arrangements we can make for you if you are called for interview and/or lesson observation** | **Yes** | **No** |
| **If Yes please specify:** | | |

1. **REFERENCES**

**Please give the names of two referees (one of whom should be your current or most recent employer)**

|  |  |
| --- | --- |
| **Name:**  **Post Title:**  **Address:**  **Postcode:**  **Telephone No.:**  **Email:**  **Relationship to you:** | **Name:**  **Post Title:**  **Address:**  **Postcode:**  **Telephone No.:**  **Email:**  **Relationship to you:** |

1. **OTHER INFORMATION IN SUPPORT OF YOUR APPLICATION**

(Please continue on a separate sheet if necessary – no more than 2 sides of A4).

1. **DISCLOSURE – An Enhanced Disclosure will be required.**

**Rehabilitation of Offenders Act 1974 (exceptions) Order 1975 (2013)**

**WORKING WITH YOUNG PERSONS UNDER AGE 18**

The Rehabilitation of Offenders Act 1974 (exceptions) Order 1975 (2013) provides that certain spent convictions and cautions are ‘protected’ and are not subject to disclosure to employers, and cannot be taken in to account. Guidance and criteria on the filtering of these cautions and convictions can be found at the Disclosure and Barring Service website: <https://www.gov.uk/government/news/dbs-filter-certain-old-and-minor-cautions-and-convictions-reprimands-and-warnings-from-criminal-record-certificates>

Please disclose 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) – a failure to do so is likely to result in dismissal should it later be discovered. Any information given in this application or on interview will be treated entirely as confidential and will be considered only in relation to this application.

Please list relevant details below - give details of date, type of offence, sentence/fine imposed:

|  |  |  |  |
| --- | --- | --- | --- |
| Date | Type of Offence | Sentence/Fined Imposed | Comments |
|  |  |  |  |
|  |  |  |  |
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If you have worked with children in either a paid or voluntary capacity, please note that your current/most recent employer, where you were employed to work with children, will be asked about disciplinary offences relating to children, young people and vulnerable adults, any child protection concerns and the outcomes of any enquiries or disciplinary procedures. This will include any instances for which the penalty is time expired.

1. **DATA PROTECTION**

The information collected on this form and other information which constitutes your personnel record will be used in compliance with the Data Protection Act 1998. The information is being collected for the purpose of administering the employment and training of employees.

The information may be disclosed, as appropriate, to governors of schools, to Occupational Health, to the LGPS, to the Department for Education, Law Enforcement Authorities, pension providers and relevant statutory bodies.

Application forms of unsuccessful candidates will be destroyed after six months following an appointment to the job. Giving false information will result in your application not being pursued or your contract being terminated if you have already been appointment to the job.

I consent to the Collegiate Academy Trust recording and processing the information detailed in this application form. I understand that this information may be used by The Collegiate Academy Trust in pursuance of its business purposes and my consent is conditional upon The Collegiate Academy Trust complying with their obligations under the Data Protection Act 1998.

1. **CONFIRMATION OF DETAILS**

I hereby certify that all the information given on this form is correct and that all questions related to me have been accurately and fully answered, and that I am in possession of the certificates I claim to hold. I understand that should the information given in this application be incorrect it may result in my application being rejected, or if selected for the position, summary dismissal, and possible referral to the police.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature** |  | **Date** |  |

**Please note where an application is submitted electronically, shortlisted candidates will be required to sign a printed copy of this form at interview.**

1. **RETURN ADDRESS**

**Please return to:**

[lsmith@hpa.shirelandcat.org.uk](mailto:lsmith@hpa.shirelandcat.org.uk)

or via post to:

Holyhead Primary Academy

Holyhead Road

Wednesbury

West Midlands

WS10 7PZ

**RECRUITMENT MONITORING**

Name:

Job title:

Gender

I am:  Female  Male

To help us monitor our Equal Opportunities in Employment Policy please tick or complete the following boxes as appropriate:

Ethnic Origin

Choose one section from (A) to (E) then tick the appropriate box to indicate your cultural background.

A White

British  Irish  Gypsy or Irish Traveller  Albanian

Any other White background, please indicate:

B Mixed

White/Black – Caribbean  White/Asian  White/Black – African  Black/Asian

Any other mixed background please indicate:

**C Asian or Asian British**

Indian  Kashmiri  Pakistani  Bangladeshi  Chinese

Any other Asian background, please indicate:

**D Black or Black British**

Caribbean  African

Any other Black background, please indicate:

**E Other ethnic group**

Arab  Kurdish  Vietnamese

Any other please indicate:

**Not disclosed**