|  |
| --- |
|  |
| Employment Application Form   |

|  |  |
| --- | --- |
| **Position Applied For and School** |  |

|  |
| --- |
| **Personal Details** |
| **First Name** |  |
| **Surname** |  |
| **Preferred Title** |  |
| **Previous Surnames** |  |
| **National Insurance No** |  |
| **Do you hold a current Driving License** | Yes No |
| **Contact Details** |
| **Full address, including postcode** |  |
| **Home Phone** |  |
| **Mobile Phone** |  |
| **Email Address** |  |

|  |
| --- |
| **Disability and Accessibility** |
| The Academy is committed to ensuring that applicants with disabilities or impairments receive equal opportunities and treatments. If you have a disability or impairment and would like us to make adjustments to assist if you are called for an interview, please state the arrangements you require. |
|  |
| **Current Employment Details** |
| **Job****Title** | **Name and Address of Employer** | **Dates Employed****Month & Year** | **Permanent or Temporary** | **Part-time or Full-time** | **Salary Details (Including Allowances)** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Previous Employment (MOST RECENT FIRST)** |
| **Job Title** | **Name and Address of Employer** | **Description of Responsibilities** | **Dates Employed** **Month & Year** | **Reason for Leaving** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Gaps in Employment** **Please provide details of any gaps in employment (secondary education onwards)** |
| **Dates**  | **Reason** |
|  |  |
|  |  |
|  |  |

|  |
| --- |
|  |

|  |
| --- |
| **Education and Qualifications** |
| Please provide details of your education from secondary school onwards.You will be required to produce evidence of qualifications. |
| **Dates Attended** **(Month and Year)** | **Name and Location of School/College/University** | **Qualifications Gained** **(Including Grades)** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
| **Training and Professional Development** |
| Please give details of training or professional development courses undertaken in the last 3 yearsthat are relevant to your application.  |
| **Course Dates** | **Length of Course** | **Course Title** | **Qualification Obtained** | **Course Provider** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |
| --- |
| **Teacher Status (*teaching applicants only)***  |
| **Teacher Reference Number** |  |

|  |
| --- |
|  |

|  |
| --- |
| **Additional Information in support of your Application** |
| Please list in **bullet point format** any skills, experience, achievements or other information which you believe are relevant to this role. (Maximum 300 words) |
|   |
| Please explain why you have applied to this role. (Maximum 300 words) |

|  |
| --- |
|  |

|  |
| --- |
| References |
| Please give names of **two people** who are able to comment on your suitability for this post. One must be your **present or last employer**. If you have not previously been employed, please provide details of another suitable referee. The Academy reserves the right to seek any additional references it deems appropriate. |
| **CONSENT TO OBTAIN REFERENCES**By completing this application, I give my consent for the Academy to approach the below named referees for the purpose of obtaining current or previous employment reference information or any other information they feel is relevant to this application. |
| If you do not wish us to contact your referee before a job offer is made, please tick this box: ☐ |

**SIGNED: ………………………………………………………… DATE…………….……………………**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name** | **Relationship to You** | **Address and Post Code** | **Contact Number** | **Email Address** | **Is this your Current Employer?** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

|  |
| --- |
| **Relationship to the School** |
| **Please list any personal relationship that exists between you and any member/s of the school/trust community: Governors/Trustees; Staff or Pupils.** |
| **Name** | **Relationship** | **Role at the School** |
|  |  |  |

**I CONFIRM THAT ALL INFORMATION PROVIDED IS FULL, TRUE AND ACCURATE**

SIGNED: ………………………………………………………… DATE………………………………