**ALTRINCHAM GRAMMAR SCHOOL FOR BOYS**

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| **TEACHING APPLICATION FORM** |

Altrincham Grammar School for Boys is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults and expects all staff and volunteers to share this commitment.

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| **Vacancy Details** |
| Job Title: |  |
| Job reference number (refer to job advertisement)Where did you see the job advertised |  |

It is the School’s policy to ensure that all appointments are made on merit. The details supplied by you on this form are confidential, but will form part of the personnel record of the successful candidate.

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| **Personal Details** |
| Title: |  |
| First name(s): |  |
| Last name: |  |
| Known as: |  |
| Address: |  |
| Postcode: |  |
| Contact Number: |  |
| Email address: |  |
| National Insurance Number: |  |
| Date of Achieving QTS/Probationary Period |  |
| DFE No: |  |

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| **Eligibility to work in the UK** |
| Current legislation means that it is a criminal offence to employ a person who is subject to immigration control, unless he or she has documentary proof showing an entitlement to work in the UK. If selected for interview you will be asked to provide proof of your work entitlements. |
| Do you have an entitlement to work in the UK? **YES** [ ]  **NO** [ ]  |

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| Interview Arrangements |
|  Do you require any special facilities for interview? YES/NOIf so, please give details. |

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| **TEACHING EXPERIENCE**  |

Please list all other jobs held, starting with the most recent, including any previous or current employment with this authority (whether directly or through an employment agency). **There should be no gaps in your employment and education history.**

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| **Current/Previous Teaching Experience** |
| Name of school/employer: |  |
| Job Title: |  |
| Salary: |  |
| Date first went through threshold, if applicable: |  |
| Date from (dd/mm/yyyy): |  |
| Date to (dd/mm/yyyy) (if applicable): |  |
| Age Range taught: |  |
| Status/Curriculum/Responsibilities/Subjects |  |
| Period of notice required (if applicable): |  |
| Reason for leaving: |  |
| Please provide brief details of duties and responsibilities: |  |

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| **Previous Teaching Experience** |
| Name of school/employer: |  |
| Job Title: |  |
| Salary: |  |
| Date first went through threshold, if applicable: |  |
| Date from (dd/mm/yyyy): |  |
| Date to (dd/mm/yyyy) (if applicable): |  |
| Age Range taught: |  |
| Status/Curriculum/Responsibilities/Subjects |  |
| Period of notice required (if applicable): |  |
| Reason for leaving: |  |
| Please provide brief details of duties and responsibilities: |  |

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| **Previous Teaching Posts** |
| Name of school/employer: | Job Title & Salary | Date from (dd/mm/yyyy) | Date to (dd/mm/yyyy) | Status/Curriculum/Responsibilities /Subjects | Reason for leaving | Provide brief details of your duties |
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Please list all other jobs held, starting with the most recent, including any previous or current employment with this authority (whether directly or through an employment agency). There should be no gaps in your employment and education history

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| **Previous Employment Experience other than Teaching** |
| Name of previous employers | Job Title | Address | Date from (dd/mm/yyyy) | Date to (dd/mm/yyyy) | Reason for leaving | Provide brief details of your duties |
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If there are any periods of time that have not been accounted for, for instance, periods of travel, or caring for others please give details of them here with dates. The information provided must provide a complete chronology from the age of 16; please ensure that there are no gaps in the history of your employment and other experience.

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| **EDUCATION AND TRAINING** |

Apart from giving details of formal education and qualifications, mention any short/non-qualification courses that you may have attended to improve your knowledge and skills, please ensure that they are relevant to the job you are applying for. Successful applicants will be required to provide proof of qualifications.

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| **EDUCATION** |
| Qualifications | Grade | Where Obtained | When Obtained |
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| Type of Teacher Training (Please tick)\* | Early Years [ ]  | Primary [ ]  | Middle [ ]  |
| Secondary [ ]  | Special [ ]  | FE [ ]  |

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| **MEMBERSHIP OF PROFESSIONAL BODIES** |
| Professional Body | Level & method of Membership | Membership Number | Date of Membership |
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RECES**999999**

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| **TRAINING / DEVELOPMENT** |
| Subject | Provider | Date Attended |
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| **OTHER APPLICANT DETAILS** |

**HER APPLICANT DETAILS**

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| Are you currently, or have you previously been employed by AGSB? **YES/NO** No ☐If yes, please provide dates from and to and give reasons for leaving (If applicable) Date from:Date to:Reason for leaving:Do you have any family or close relationships to existing employees at Altrincham Grammar School for Boys (including Governors/Trustees) **YES/NO** ☐ No ☐ If yes, please provide details of their name and relationship to you: |

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| **SUPPORTING INFORMATION** |

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| **Skills, Knowledge and Experience** |
| This section of the application form is very important, as this is where you demonstrate your suitability for the job. Explain why you are interested in this position, how much you feel would benefit our school and give any additional information in support of your application including relevant skills and qualities. (Continue on a separate sheet if necessary) |

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| **REFERENCES** |

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| Please provide the names and contact details of at least two referees who can comment on your suitability for this position. One should be your current or most recent employer.  |

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| **Current or most recent employer** |
| Referee name: |  |
| Job title (if applicable): |  |
| Organisation: |  |
| Address: |  |
| Postcode: |  |
|  Telephone number: |  |
| Email address: |  |
| Relationship to you: |  |

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| **Previous employer** |
| Referee name: |  |
| Job title (if applicable): |  |
| Organisation: |  |
| Address: |  |
| Postcode: |  |
|  Telephone number: |  |
| Email address: |  |
| Relationship to you: |  |

## EHABILITATION OF OFFENDERS

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| REHABILITATION OF OFFENDERS |

## Under the Act, most sentences awarded by a Court for Criminal offences may be regarded as spent and disregarded, for most purposes, after a specified period of time and need not then be disclosed. However this post is exempt from the Rehabilitation of Offenders Act 1974 and you must therefore declare any and all convictions/cautions/reprimands/warnings you may have had. As you will be working with vulnerable individuals, prior to commencing in post you will be required to undergo a Disclosure and Barring Service check.

This post involves working with children, young people, vulnerable adults or is a position of trust. The amendments  to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are 'protected' and are not subject to disclosure to employers, and cannot be taken into account.

Guidance and criteria on the filtering of these cautions and convictions can be found at the Disclosure and Barring Service website ([www.gov.uk/dbs](http://www.gov.uk/dbs)). Any failure to disclose the appropriate information could result in dismissal or disciplinary action by the organisation. Please note that a criminal record will not necessarily be a bar to obtaining a position.

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| **Declaration** |
| Have you at any time received, or do you have pending, a caution, bind-over, reprimand, final warning or conviction? **YES/NO**If yes, please give details of the caution (s) or conviction(s) and date(s)Do you have any previous offences/s? If so please give details of the offence(s) and date(s) |

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| **DATA PROTECTION 1998** |

We undertake to treat personal details on this application form from which you can be identified, with complete confidentiality. By submitting this application form you are consenting for your details to be used in our recruitment process in accordance with the Data Protection Act 1998.**EXPERIENCE**

To the best of my knowledge the above facts are a true statement. I accept that providing deliberately false information could result in my dismissal.

Should an offer of employment be made we reserve the right to require you to undergo a medical. (Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law requires us to inform you of our intention and obtain your permission prior to contacting your doctor).

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| **Declaration** |
| Signature of applicant:Date: |