Application Form

Confidential

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| Application for the post of | Which post are you applying for? |

# Personal Details

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | Name of Applicant | | | | | | | | |
| Title | | | Please enter your title | | | | | | | | |
| First name | | | First name | | | | | | | | |
| Last name | | | Last name | | | | | | | | |
| Middle name/s | | | Middle names (if any) | | | | | | | | |
| Previous Names (If Applicable) | | | Have you been known by any other name/s? | | | | | | | | |
|  | | | Contact Details | | | | | | | | |
| Address Line 1 | | | House number/ name and street name | | | | | | | | |
| Town | | | Town | | | | | | | | |
| County | | | County | | | | | | | | |
| Post Code | | | Post Code | | | | | | | | |
| Mobile Number | | | Your mobile number | | | | | | | | |
| Landline/ Home Number | | | Your landline (if applicable) | | | | | | | | |
| email Address | | | Your email address | | | | | | | | |
|  | | | Additional | | | | | | | | |
| Notice Period/ Start Date | | | What would be your earliest start date? | | | | | | | | |
| Salary Expectation | | | Enter your salary expectation £ | | | | | | | | |
| National Insurance Number | | | National Insurance Number | | | | | | | | |
| If you have applied for any New College vacancies in the last 12 months, please give details | | | Please list any previous roles at New College which you have applied for | | | | | | | | |
| QTS/ QTLS Details If applicable | |  | | | | | | | | | |
| Do you hold Qualified Teacher Status (QTS), Qualified Teacher Learning and Skills (QTLS) status or equivalent? | | Yes | | |  | No |  |  | | | |
| If applicable, please give details of your current teaching qualilfication/s. | | | | | | | | | |
| Are you currently on a teaching qualification? | | Yes | | |  | No |  |  | | | |
| If applicable, please state which teaching qualification | | | | | | | | | |
| Date of last Observation | | Date of observation | | | | | | | | | |
| Observation Outcome | | Observation Outcome | | | | | | | | | |
| Education and Qualifications Please also include any relevant professional qualifications. We will require you to produce evidence of qualifications. Please state your level of Maths and English qualifications separately. | | | | | | | | | | | |
| Name of Institution  (e.g. School, College or University) | Dates Attended | | | | | | | | Courses/Subjects Taken and Examinations Results or  Award and Date | | |
| From month/year | | | To  month/year | | | | | Qualification Name | Subject | Grade |
| Institution Name | MM/YY | | | MM/YY | | | | | Qualification Name | Subject | Grade |
| Institution Name | MM/YY | | | MM/YY | | | | | Qualification Name | Subject | Grade |
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| **Any further qualifications to be listed on the personal statement**  Current Membership of Professional Bodies  Please give details of any relevant professional bodies to which you belong. | | | | | | | | | | | |
| Name of professional body | | | | Membership Status | | | | | | Date Membership Commenced | |
| Name of Body | | | | Membership Status | | | | | | Date Commenced | |
| Name of Body | | | | Membership Status | | | | | | Date Commenced | |
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| Continuous professional Development  (including short courses) and/or Membership of Professional Body (last 3 years only) | |
| Date | Title and Award Body/Membership of Professional Body |
| MM/YY | Professional Body Name |
| MM/YY | Professional Body Name |
| MM/YY | Professional Body Name |
| MM/YY | Professional Body Name |
| MM/YY | Professional Body Name |

# Present or Most Recent Employment

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title of Post | Job Title | | | |
| Name of Employer | Employer | | | |
| Address Line One | Building name and/or Street | | | |
| Town | Town | | | |
| County | County | | | |
| Post Code | Post Code | | | |
| Date | From | MM/YY | To | MM/YY |
| Full-time, Part-time or Size of contract | Contract FT/ PT or size | | | |
| Key Responsibilities and  Achievements | Responsibilities and achievements in this role | | | |
| Salary | £ Salary in this role | | | |
| Reason for Leaving | Your reason for leaving this role | | | |

# Previous Employment

Please give details of all previous employment you have held, starting with the most recent. Please note that there are sections below for you to detail any gaps of employment.

|  |  |  |  |  |
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| Title of Post | Job Title | | | |
| Name of Employer | Employer | | | |
| Address Line One | Building name and/or Street | | | |
| Town | Town | | | |
| County | County | | | |
| Post Code | Post Code | | | |
| Date | From | MM/YY | To | MM/YY |
| Full-time, Part-time or Size of contract | Contract FT/PT or size | | | |
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# Previous Employment

Please give details of all previous employment you have held, starting with the most recent. Please note that there are sections below for you to detail any gaps of employment.

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# Previous Employment

Please give details of all previous employment you have held, starting with the most recent. Please note that there are sections below for you to detail any gaps of employment.

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|  |  |  |
| --- | --- | --- |
| Gaps in Employment  Please give details below of any gaps in employment you have not detailed elsewhere in your employment history or reasons for other periods of time when you have not been employed since leaving secondary education. | | |
| Date From | Date To | Reason |
| MM/YY | MM/YY | Please give the reason for this gap in employment |
| MM/YY | MM/YY | Please give the reason for this gap in employment |
| MM/YY | MM/YY | Please give the reason for this gap in employment |
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| Supporting Statement  You are invited to provide further information in support of your application. Please refer to the job specification for the post and also include:   * The reasons why you are applying for this post * The personal qualities and experience that you feel are relevant to your suitability for the post * Key responsibilities and achievements in your present or most recent job which are relevant to this application * Career aims and aspirations | | | |
| Your supporting statement in applying for this role | | | |
| Completed by | Name of person completing this form | Date | DD/MM/YY |
|  |  |  |  |