

New Perspectives School

Employment Application Form



Instructions:

Please complete all sections of this form using black ink or type.
 The sections of this application form that include your personal details and equalities monitoring information will be detached prior to shortlisting. This is to ensure that your application is dealt with objectively.
Applications will only be accepted if this form is completed in full.

POST APPLIED FOR

Job title:

Location:

Where did you hear about this vacancy?

What date are you available to begin a new post?

PERSONAL DETAILS (BLOCK CAPITALS)

Surname:

Title:

First name(s):

Previous name(s):

Address:

Postcode:

Telephone number:

Email address:

Mobile Number:

National Insurance Number:

Are you eligible work in the UK?

Do you have a current full UK (or equivalent) manual driving licence?
 If yes, for how long have you held this?

DISABILITY AND ACCESSIBILITY

New Perspectives School has committed to ensuring that applicants with disabilities or impairments receive equal opportunities and treatment.

If you have a disability or impairment, and would like us to make adjustments or arrangements to assist if you are called for an interview, please state the arrangements you require:

TEACHING POSITIONS: RIGHT TO WORK IN THE UK

Do you have the right to work in the UK?

- Yes
 No

If yes, please state on what basis:

- UK citizen
 EU settled status
 Skilled worker visa
 Graduate visa
 Youth mobility visa
 Other – please provide full details in the box below

TIME SPENT LIVING AND/OR WORKING OVERSEAS

Have you spent time living and/or working outside of the UK?

- Yes
 No

If yes, please give details, including countries and relevant dates:

Educational / Professional / Vocational Qualifications including Secondary Education

Please complete sections below, all successful applicants to provide evidence of their qualifications. If you require further space, please attach a separate page.

Secondary Education / School	Full time / Part time	Dates from / to (MM/YYYY)	Qualifications / Awards gained	Grade

Further Education: College / University / Awarding body	Full time / Part time	Dates from / to (MM/YYYY)	Qualifications / Awards gained	Grade

Professional Registration (If applicable)	Registration number	Professional body

References

Please provide details of at least two referees. One of these **MUST** be your current or most recent employer. **Referees will be required for ALL roles where you have worked with children or vulnerable adults either paid or voluntary.** If you require further space, please attach a separate page. (Referees should **not** be partners or family members). Please note that any previous employer not given as a referee may also be contacted. Any offer of employment is subject to satisfactory references. In line with safeguarding procedures, references for positions within schools are taken up prior to interview.

Education roles: references will be taken prior to interview in line with Safer Recruitment

REFERENCE (CURRENT / MOST RECENT EMPLOYER)	
Company name:	Contact Name:
Position Held:	Email address: Telephone No:
Employer Address:	
Postcode:	

REFERENCE	
Company name:	Contact Name:
Position Held:	Email address: Telephone No:
Employer Address:	
Postcode:	

REFERENCE	
Company name:	Contact Name:
Position Held:	Email address: Telephone No:
Employer Address:	
Postcode:	

Reference Declaration:		
Please sign the below declaration to give consent to us contacting all referees.		
By signing this declaration, I give my consent to Care Perspectives to obtain references from the details I have provided.		
Furthermore, I give consent to gaining written/verbal verification from all care/education-based and relevant employers.		
Name _____	Signed _____	Date _____

DISCLOSURE AND BARRING AND RECRUITMENT CHECKS

New Perspectives School is legally obligated to process an enhanced Disclosure and Barring Service (DBS) check before making appointments to relevant posts.

The DBS check will reveal both spent and unspent convictions, cautions, reprimands and final warnings, and any other information held by local police that's considered relevant to the role. Any information that is "protected" under the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 will not appear on a DBS certificate.

For posts in regulated activity, the DBS check will include a barred list check.

It is an offence to seek employment in regulated activity if you are on a barred list.

We'll use the DBS check to ensure we comply with the Childcare Disqualification Regulations. It is an offence to provide or manage childcare covered by these regulations if you are disqualified.

Any data processed as part of the DBS check will be processed in accordance with data protection regulations and the New Perspectives School privacy notice.

Do you have a DBS certificate?: Yes No Date of check: _____

If you've lived or worked outside of the UK in the last 5 years New Perspectives School may require additional information in order to comply with 'safer recruitment' requirements. If you answer 'yes' to the question below, we may contact you for additional information in due course.

Have you lived or worked outside of the UK in the last 5 years?: Yes No

Any job offer will be conditional on the satisfactory completion of the necessary pre-employment checks.

Only applicants who have been shortlisted will be asked for a self-declaration of their criminal record or information that would make them unsuitable for the position.

Any convictions that are self-disclosed or listed on a DBS check will be considered on a case-by-case basis.

TIME SPENT LIVING AND/OR WORKING OVERSEAS

If you've lived and/or worked outside of the UK, New Perspectives School must make any further checks it considers appropriate (in addition to the usual pre-employment checks).

We'll base the decision on whether this is necessary on individual circumstances, and factors such as:

- The amount of information you disclose in the DBS check
- The length of time you've spent in or out of the UK

RIGHT TO WORK IN THE UK

New Perspectives School will require you to provide evidence of your right to work in the UK in accordance with the Immigration, Asylum and Nationality Act 2006. By signing this application, you agree to provide such evidence when requested.

Rehabilitation of Offenders Act 1974 (Exemption Order)

Because of the nature of the work you are applying for, it is exempt from the provisions of the Rehabilitation of Offenders Act 1974. You are therefore required to disclose any pending prosecutions or criminal convictions you may have including those, which may be, for other purposes, considered spent:

Do you have or have you ever had any criminal convictions? Yes No

Are you currently:

Under suspicion or investigation in relation to any criminal offence? Yes No

Awaiting trial for any criminal offence? Yes No

*If you have answered 'Yes' to any of these questions, please provide details of the offence and sentence on an attached page. Answering 'Yes' to these questions will not automatically disqualify you from employment. However, you should be aware that it is an offence to provide false or inaccurate information in order to gain employment.

Data Protection GDPR:

The information or data which you have supplied on this form will be processed and held on computer and will also be kept in your personal records if you are appointed. The data may be processed by **Care Perspectives** for the purposes of equality monitoring, compiling statistics and for the other employment records.

In signing and returning this application form you are deemed to have given consent to processing data contained in or referred to in it, including any data which may be considered to be sensitive personal information.

If you wish to disclose further information at this stage regarding the above, please tick the box and provide details on an attached page (otherwise, leave this section blank).

I wish to disclose further information: ✓ or X

Declaration:

I confirm that the information contained in this application is true and accurate. I understand that providing false, incomplete, or misleading information will disqualify me from employment.

I also understand **Care Perspectives** will requires a full DBS disclosure if my application is successful.

I sign to confirm the above declaration

Print Name:

Signature:
(handwritten)

Date:

Thank you for completing our Employment Application form.
Please email your completed application form to Caroline Dhir (Administration Manager - School)
email: c.dhir@careperspectives.co.uk

New Perspectives School
Tel: 0789 7551992

Equalities monitoring

We're bound by the Public Sector Equality Duty to promote equality for everyone. To assess whether we're meeting this duty, whether our policies are effective and whether we're complying with relevant legislation, we need to know the information requested below.

This information **will not** be used during the selection process. It will be used for monitoring purposes only.

EQUALITIES MONITORING INFORMATION

	D	D	M	M	Y	Y	Y	Y
What is your date of birth?								
What is your sex?	<input type="checkbox"/> Male <input type="checkbox"/> Female							
What gender are you?	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other <input type="checkbox"/> Prefer not to say							
Do you identify as the gender you were assigned at birth?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say							
How would you describe your ethnic origin?								
White <input type="checkbox"/> British <input type="checkbox"/> Irish <input type="checkbox"/> Gypsy or Irish Traveller <input type="checkbox"/> Any other White background Asian or British Asian <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Chinese	Black or Black British <input type="checkbox"/> African <input type="checkbox"/> Caribbean <input type="checkbox"/> Any other Black background Mixed <input type="checkbox"/> White and Asian <input type="checkbox"/> White and Black African <input type="checkbox"/> White and Black Caribbean <input type="checkbox"/> Any other mixed background	Other Ethnic groups <input type="checkbox"/> Arab <input type="checkbox"/> Any other ethnic group <input type="checkbox"/> Prefer not to say						

Which of the following best describes your sexual orientation?

- Bisexual
- Heterosexual/straight
- Homosexual

- Other
- Prefer not to say

What is your religion or belief?

- Agnostic
- Atheist
- Buddhist
- Christian
- Hindu

- Jain
- Jewish
- Muslim
- No religion

- Other
- Pagan
- Sikh
- Prefer not to say

Are your day-to-day activities significantly limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

- Yes
- No
- Prefer not to say

If you answered 'yes' to the question above, please state the type of impairment. Please tick all that apply. If none of the below categories applies, please mark 'other'.

- Physical impairment
- Sensory impairment
- Learning disability/difficulty
- Long-standing illness
- Mental health condition
- Developmental condition
- Other