Date Rec:

No:

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| 1. Vacancy Details |
| Post for which you are applying: Teacher of Mathematics  Directorate: Shrewsbury Academy |
| Please return this form directly to:  Hazel O’Shea  Shrewsbury Academy, Corndon Crescent, Shrewsbury, SY1 4LL  Email to: h.o’shea@sa.sat.coop |

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| 2. Personal Details | |
| Family Name: | Initials: |
| Home Address: | Telephone Work: |
| Telephone Home: |
| Postcode: | Mobile Number: |
| NI Number: | E-mail: |

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| Guidance Notes & Data Protection Act |
| * Please note that we do not accept CVs (curriculum vitae). * We will decide whether to invite you for interview on the basis of information given by you on this application form (Sections 3-9 and 14). * When you sign and return this form, you are giving us permission to process and hold on computer, the information or data you have supplied or referred to on it, including any information that you may consider to be sensitive and personal. * This information will also be held on your personal file, if you are appointed. * The data may be used by Shrewsbury Academies Trust for the purposes of equality monitoring, compiling statistics and maintaining other employment records |

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| 3. Present employment (if you are currently unemployed, please leave blank) | |
| Job title: | Basic pay/grade: |
| Employer’s name: | Other pay: |
| Nature of business: | |
| Address: | Date Started: |
| Period of notice: |
| Postcode: | Telephone number: |
| May we contact you on this number? |
| Outline of duties and responsibilities: | |
| Please continue on a separate sheet if necessary, placing your initials at the top. | |

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| 4. Previous Employment | |
| * Please list all of your previous jobs including any with your present employer. Include all local government and related service. Start with the most recent. * Reference may be sought from your previous employers. | |
| Job title: | Date started: |
| Employer’s name: | Date left: |
| Address: | Brief outline of duties: |
| Postcode: | Reason for leaving: |
| Job title: | Date started: |
| Employer’s name: | Date left: |
| Address: | Brief outline of duties: |
| Postcode | Reason for leaving: |
| Job title: | Date started: |
| Employer’s name: | Date left: |
| Address: | Brief outline of duties: |
| Postcode: | Reason for leaving: |
| Job title: | Date started: |
| Employer’s name: | Date left: |
| Address: | Brief outline of duties: |
| Postcode: | Reason for leaving: |
| Job title: | Date started: |
| Employer’s name: | Date left: |
| Address: | Brief outline of duties: |
| Postcode: | Reason for leaving: |
| Job title: | Date started: |
| Employer’s name: | Date left: |
| Address: | Brief outline of duties: |
| Postcode: | Reason for leaving: |
| Job title: | Date started: |
| Employer’s name: | Date left: |
| Address: | Brief outline of duties: |
| Postcode: | Reason for leaving: |
| Please continue on a separate sheet if necessary, placing your initials at the top. | |

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| 5. Breaks in employment history since leaving school(completion is mandatory) | | |
| Any gaps in employment history since leaving school and reasons must be detailed below: this should include voluntary work, unemployment, domestic reasons, prison custody, etc. | | |
| From: | To: | Reason: |
| From: | To: | Reason: |
| From: | To: | Reason: |
| From: | To: | Reason: |

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| 6. Training | | | | |
| Please list below relevant job-related training you have undertaken, and/or any professional qualifications achieved. | | | | |
| Date | Course Title | Organiser | Length | Office use only, Certificates checked by |
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| Please continue on a separate sheet if necessary, placing your initials at the top. | | | | |

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| 7. Educational qualifications | | | |
| Please give details of secondary, further and higher education qualifications achieved. Start with the most recent. | | | |
| Date | Institute details (e.g. College etc.) qualification gained or pending, and subject | Grade obtained | Office use only, Certificates checked by |
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| Please continue on a separate sheet if necessary, placing your initials at the top. | | | |

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| 8. Membership of professional bodies (Please state whether by election, exemption or examination) | | | | |
| Date | Professional Body | Membership No. | Grade/Level | Office use only, Certificates checked by |
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| 9. Further details | | | | |
| * Please give any other information which you think will help us to consider your application, including relevant experience (voluntary or work), skills, abilities, and any specialist knowledge you have. * You should try and relate your information to the job description and person specification for the post you are applying for. | | | | |
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| Please continue on a separate sheet if necessary, placing your initials at the top. | | | | |

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| 10. Disciplinary matters (Include any formal disciplinary proceedings.) | |
| Have you ever been the subject of formal disciplinary proceedings? If yes, please give details including dates below. |  |
| Have you ever been, or currently are, the subject of a disciplinary investigation? |  |
| If YES, please provide details below: | |

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| 11. Relationship to or with academy employees | |
| Please give the details of any elected member or employee of the academy you are in a relationship with or a relation to. If you fail to disclose such information you may be disqualified from consideration or, if appointed, liable to dismissal. **Canvassing of any board member or governor or senior officer will disqualify a candidate for appointment.** | |
| Name: | Relationship: |

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| 12. Criminal Convictions/Cautions/Disqualified Persons/Investigations |
| * **Shrewsbury Academies Trust “regards as paramount the welfare and safety of vulnerable adults & children. Whilst criminal convictions are not necessarily a bar, this safety consideration will be key to all decisions regarding the employment of staff, or volunteers and standards of external contractors.”** * **This position is exempt under the Rehabilitation of Offenders Act 1974.** * “It is within this context, and the following guidelines, that decisions will be made in relation to applicants who have any form of criminal conviction or who are included on the DBS Children’s Barred List.” * **To assist with the implementation of this policy, all applicants are to complete the following questionnaire and provide written consent for checks to be completed.** |

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| 1. Have you ever been convicted of a criminal offence or received a police caution, reprimand or warning?  (If the answer is **YES**, please provide the details in section 16.) |
| 2. Are you at present the subject of a criminal charge or investigation?  (If the answer is **YES**, please give details below.) |
| 3. Has your name been added to either:   * The DoH Consultancy List, now known as the Protection of Children Act List * The DfE List 99; * The Protection of Vulnerable Adults List * The DBS Barred List   (If the answer is **YES**, please give details below.) |
| 4. Are you disqualified from childcare either directly or by association?  (If the answer is **YES**, please give details below.) |
| (Applicants are reminded that knowingly withholding this information; or failing to disclose subsequent information is likely to lead to immediate suspension or termination of employment or approval).  Further, applicants should note that it is a criminal offence to knowingly apply for, offer to do, accept or do any work with children when prevented either:  **a)** By reason of disqualification order under the Criminal Justice and Court Services Act 2000  **b)** By reason of inclusion on the DBS Children’s Barred List.  I hereby give consent to the local authority on behalf of Shrewsbury Academies Trust in completing such checks as are necessary in order to verify the information provided above.  **I understand that the Shrewsbury Academies Trust will not reveal this information to any other organisation or individual, unless it is asked a direct question about me or circumstances suggest that the protection of a child or children or vulnerable adult require immediate disclosure. I understand that, if practicable, I will be alerted to such possible disclosure and be invited to comment.** |

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| Name: | Position applied for: |
| Signed: | Date: |

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| 13. If you answered YES to any of the questions in Section 15, please give further details below: | | |
| This post is exempt under the Rehabilitation of Offenders Act and a Criminal Records Bureau Disclosure will be required from the successful applicant. Convictions or other disclosures will not necessarily be a bar to obtaining a position with Shrewsbury Academies Trust.  **FOR COMPLETION BY THE APPOINTING OFFICER**  **I confirm that I have discussed the above disclosure with the applicant.** | | |
| Signed: | Position held: | Date: |

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| 14. References | |
| * Please give details of two referees whom we may ask about your suitability for the job. * You are requested to give referee details from two employers, the first of which must be your current or most recent employer. * If you are unable to provide two employment references, please make a note of this on the application for the HR Team to provide further guidance. * You should not name a relative or a friend as a referee. * References will usually only be taken up if you are short-listed. * We will not confirm an offer of appointment until we have received satisfactory reference from your present or most recent employer (or school if you are a school leaver) | |
| (1) Name: | (2) Name: |
| Address: | Address: |
| Postcode: | Postcode: |
| Telephone number: | Telephone number: |
| E-mail: | E-mail: |
| Occupation: | Occupation: |
| *Working relationship to you:* | *Working relationship to you:* |
| May we contact these referees without asking you? (1) (2) | |

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| 15. Driving | |
| Do you have a full current driving license? |  |
| If YES, type of license? |  |
| Do you have a vehicle available for work purposes? |  |

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| 16. Languages (Please detail below if you have any language ability other than English) | |
| Able to effectively converse and read: |  |
| Able to convers, read and write: |  |
| Totally fluent: |  |

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| 17. Equal Opportunities Policy |
| It is the policy of Shrewsbury Academies Trust to ensure that no person, whether a job applicant, employee, service user or this party receives any less favourable treatment because of his or her gender, marital status, family status, lifestyle, age, ethnicity, religion, sexual orientation, disability, political affiliation, trade union membership or any other condition or requirement which cannot be shown to be justifiable.  Policy Statement for Applicants with Disabilities  Under the Equalities Act 2010 employers have a duty to make reasonable adjustments where, compared to a non-disabled person, a disabled person is substantially disadvantaged by either the working arrangements (which include the recruitment process) or the working environment.  The Act defines a disabled person in the following way:  “A disabled person is anyone who has or has had a physical or mental impairment which has a substantial and long term effect on their ability to carry out normal day to day activities.”  Please contact us if you are disabled and need any adjustments for the interview. Any supporting information, for example a letter from a Disability Employment Adviser, would be helpful. The information you provide will be shared with the appointing officer responsible for shortlisting applicants and organising the selection process, you should be aware that you may be asked to give details and any supporting information. |

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| 18. Your signature | |
| I certify that to the best of my knowledge the details provided on this form and all other supporting papers are true and correct. Furthermore, I understand that if I have provided false or misleading information in response to any questions on this form or have failed to disclose information, this will result in the termination of any contract of employment entered into, or the withdrawal of any offer of employment. I also hereby give my explicit consent to the processing of data contained or referred to on this form, in accordance with the Data Protection Act 1998 and any subsequent legislation.  I confirm that I have a legal right to work in the UK and if this application is successful, I undertake to produce appropriate documentary evidence to prove this, prior to commencing work with the Trust. | |
| Signature of applicant: | Date: |
| NB: If you are application is submitted electronically, you will be asked to sign this form if invited to interview. | |

**Please now complete the recruitment monitoring form on the next page.**

This sheet will be detached from your application form and will not be seen by anyone involved in the selection process. We will use this information for monitoring our recruitment processes and, if you are appointed, for our personnel/payroll records.

Monitoring form number

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| Surname: | First name: |
| Known as: | Second name: |
| Previous name(s): | Preferred title: |
| Date of Birth: | Age: |
| Place of Birth: | Directorate/School: |
| Post applied for: | |
| Gender: | Job share: |
| **Ethnic Origin:** I would describe my ethnic origin as:  *White / Black / Black British / Asian / British Asian / Mixed / Chinese*  Other: | |
| **Religion:** In terms of my religion, I would describe myself as:  *Christian / Jewish / Buddhist / Muslim / Hindu / Sikh / Other religion / No religion* | |
| **Sexual Orientation:**  *Heterosexual / Lesbian / Gay / Bisexual / I would prefer not to say* | |
| **Disability:** For definition, please refer to our policy statement on the previous page. In line with this policy, do you consider yourself to have a disability? **Y/N**  If you are selected for interview; are there any special arrangements that we would need to make for you? **Y/N**  If YES, and you are successful in being selected for interview, we will contact you after the shortlist has been drawn up to discuss arrangements. | |
| **Advert:** Where did you see this vacancy advertised? Please tick… | |
| Local newspaper  Job Centre  Shropshire Council website  School website | National newspaper  Professional Journal  Internet  Other |