



APPLICATION FOR THE POST OF

FACILITIES MANAGER

Please include all applicable information on this form, do not submit a CV as this will not be considered.

When completed this form should be returned by post or email to:

## Ms Lauren Falla, Elizabeth College, The Grange, St Peter Port, Guernsey, GY1 2PY

**E: HR@elizabethcollege.gg**

as soon as is reasonably possible and **no later than noon on Monday 27th September 2021.**

1. **PERSONAL INFORMATION**

|  |  |  |
| --- | --- | --- |
| Full name *(please underline the name(s) by which you like to be known)*: | | |
| Former surnames *(eg maiden name or where there has been any previous change of name)*: | | |
| Title: Mr / Mrs / Miss / Ms / Other: | | Nationality: |
| Address *(including post code)*: | | |
| Telephone *(landline)*: | | Telephone *(mobile)*: |
| Email: | | Current salary: |
| Length of notice period: | | |
| Guernsey Residency Status: YES / NO | If YES – please advise on what basis: | |

1. **ACADEMIC & PROFESSIONAL QUALIFICATIONS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Secondary school(s) attended | Start date  *(MM/YYYY)* | End date  *(MM/YYYY)* | A levels/Other | Grade |
|  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| University/College  Other Awarding Body | Start date  *(MM/YYYY)* | End date  *(MM/YYYY)* | Qualification & Subject | Class/Grade |
|  |  |  |  |  |

1. **CAREER HISTORY**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Starting with the current/most recent, please supply (in chronological order) details of employment, self-employment and any periods of unemployment *since the age of sixteen*. Please give in each case the reasons for leaving each employment. If you have lived and/or worked abroad in the last 5 years for a period of 6 months or more, you will be asked to provide a Certificate of Good Conduct or similar as appropriate. **Please provide, where appropriate, explanations for any periods not in employment, self-employment, training or further/higher education.** | | | | | |
| Start date  *(MM/YYYY)* | End date  *(MM/YYYY)* | Name of School/Organisation | Post held | Reason for  leaving |
|  |  |  |  |  |

1. **PROFESSIONAL DEVELOPMENT & TRAINING**

|  |  |  |
| --- | --- | --- |
| Please give details of any relevant training you have undertaken in the past three years | | |
| Date  *(MM/YYYY)* | Course title or description | Course provider |
|  |  |  |

1. **OTHER INTERESTS & ACTIVITIES**

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| --- |
| Please give information about any interests, hobbies, or activities in which you are involved. |
|  |

1. **YOUR INTEREST IN THIS POST**

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| Using the Selection Criteria and other information included within the Particulars of Vacancy, please demonstrate, using examples, your suitability for the position for which you are applying. Please include your reasons for applying for and interest in this position. Should you need additional space the box will expand as you type. Alternatively, please attach a separate continuation sheet. **DO NOT ATTACH A CV AS IT WILL NOT BE CONSIDERED.** |
|  |

1. **HEALTH DECLARATION**

*Anyone appointed to a post involving regular contact with children must possess the appropriate level of physical and mental fitness before any appointment offer is confirmed. All successful applicants are requested to complete a confidential medical questionnaire and where appropriate a doctor’s medical report may be required which each applicant must have expressly consented to.*

Please use the table below to indicate any significant illnesses or period of absence from work you have had in the past 10 years.

|  |  |  |
| --- | --- | --- |
| Date (MM/YY) | Nature of illness | Duration |
|  |  |  |

Do you have any disability or illness that will impact on your ability to carry out the role or that will require reasonable adjustments?

**YES / NO** (Please delete as appropriate)

|  |
| --- |
| If yes, please indicate the reason in the space below. |
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1. **THE WELFARE, PROTECTION & SAFETY OF STUDENTS**

|  |  |
| --- | --- |
| Elizabeth College is committed to safeguarding and promoting the welfare of children and young people and expects all colleagues to share this commitment. The successful candidate will be required to undergo child protection screening, including an Enhanced DBS Check. As part of our selection process candidates should expect us to seek to clarify any anomalies or discrepancies in the information provided by them or arising from their references. The interview process will explore candidates’ suitability for working with children and their previous experience in such roles. | |
| **CHILD PROTECTION** | |
| Are you subject to any sanctions or have you been, at any time, barred from working with children or young people or been placed on the Barred List, which names those who may not be employed in schools? | YES / NO |
| **REHABILITATION OF OFFENDERS** | |
| The post for which you are applying is exempt from Rehabilitation of Offenders Legislation. We, therefore, require you to declare any convictions (spent or unspent), cautions or bind-overs you may have had, regardless of how long ago, as well as any outstanding cases against you, in any country in line with the law as applicable in England and Wales. Please indicate if you have anything to declare. | YES / NO |
| **ADDITIONAL INFORMATION** | |
| Do you have any connection to existing employees or Directors of Elizabeth College (personal or professional)? | YES / NO |
| **If you have answered YES to any of the above questions, please provide details in a separate statement submitted in an envelope marked – *CONFIDENTIAL SELF-DISCLOSURE.* If submitting the form by email, details should be included in the covering email.** | |

1. **REFEREES**

|  |  |
| --- | --- |
| Please give the contact details of two referees - one should be your current/most recent employer. Where you are not currently working with children but have done so in the past, one referee must be from the employer with whom you most recently worked with children. Note that references will not be accepted from relatives or from referees writing solely in the capacity of friends. Note that referees may be contacted by telephone and will be invited to submit confidential written references, and that we will contact referees in advance of your interview unless you request otherwise. | |
| **FIRST REFEREE (Current/most recent employer)** | **SECOND REFEREE** |
| Name: | Name: |
| Position: | Position: |
| School/Organisation: | School/Organisation: |
| Address: | Address: |
| Telephone: | Telephone: |
| Email: | Email: |
| Length of time known: | Length of time known: |

1. **DECLARATION**

|  |  |
| --- | --- |
| *I confirm that the information given on this application form, and any supplementary information provided, is accurate to the best of my knowledge and belief. I understand that an appointment is dependent on completion of the Elizabeth College standard employment checks and receipt of satisfactory references. By signing this declaration, I am confirming that I am willing for such checks to be carried out, and that it is an offence to apply for this role if barred from engaging in regulated activity with children. I understand that if I provide any false or misleading information, or deliberately omit any relevant information, I could be summarily dismissed (if appointed).* | |
| **Signed** | **Date** |
| **Please note: if you sign this form electronically, you will be asked to sign a hard copy in person if you are shortlisted.** | |

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| **PLEASE INDICATE HOW YOU BECAME AWARE OF THE ADVERTISEMENT FOR THIS POST:** | | | | | |
| Elizabeth College website |  | Guernsey Press |  | TES website |  |
| Word of mouth |  | Other: | | | |