

APPLICATION FOR A TEACHING APPOINTMENT (1)

TITLE (OF POST APPLIED FOR :					
TITLE:	SURNAME:		FORENAMES:			
PERMANENT ADDRESS (inc. Post Code):		HOME TELEPHONE NUMBER (inc. STD code): WORK TELEPHONE NUMBER (inc. STD code): MOBILE TELEPHONE NUMBER: DATE OF BIRTH:				
Address to which correspondence should be sent (if different from above) and telephone number:		PREVIOUS SURNAME:				
			NATIONAL INSURANCE NO).:		
			DEPT. FOR EDUCATION REF. NO.:			
			EMAIL ADDRESS:			
EDUCA	ATION DETAILS Candidates sho	ould complete S	ection B and/or C as applica	ble		
Α	Schools / Colleges attended from the age of 11 - 18. Please give dates <u>and qualifications</u> attained.			From / To	Qualifications (inc grade)	
В	University attended. Please give dates <u>and qualifications</u> attained.			From / To	Qualifications (inc grade)	
С	Professional training e.g. PGCE / QTS Please give dates <u>and qualifications</u> attained.			From / To	Qualifications (inc grade)	

Particulars of short in-service training courses you have attended during the last three years

Date	Length of Course	Details of Course	By Whom organised

		s) and experience (if any) in te nd any interests in extra-curri	aching them. cular activities and pastoral we	ork you may have.
Have you any oth	ner special qualifications or in	erests which are relevant to t	his application?	

TEACHING EXPER	RIENCE (pleas	e enter in chronol	ogical order) Part-time em	oloyment should b	e clearly indica	ted.	
Date of Appointment	Date of leaving	Status (inc. scale and spinal point of post where	School or College (official name in full)	Sex and No. of pupils in school	Age-range	Independent/ Maintained	Reason for leaving
		appropriate					
Present Position Date)	n (and Start						Present salary £
,							
-							
		ING EMPLOYMEN	T clearly indicated as such an	d exact dates give	n where nossih	le	
From	То	Stivities should be	Employer	a exact dates give	Where possible	Post h	eld
If appointed, w	hen could yo	u begin duty?					

REFEREES

Please give names and addresses of two persons from whom confidential references may be obtained.	These should normally include your present
Headteacher or, if a newly-qualified teacher, your College Principal/Tutor.	

Name	Address (including postcode, telephone number and email address if known)	Position
1.		
2.		
NOTES		
•	prior to interview, if you are shortlisted. art date if appointed, and/or result in the n	If you have any concerns with this, please let us need for a further interview).
2. Candidates are reminded that canvass	ing of members of the School's Governing	Body will disqualify their application.
3. Applicants whose qualifications have be from the Department of Education and		ES should attach a copy of their letter recognition
4. Completed application forms should b	e submitted together with a letter of appli	cation by the published deadline.
processed and held on your personal recequality monitoring, compiling statistic	cords if you are appointed. The data may s, and for the keeping of other employ e giving your explicit consent to processing	pe processed and held on computer, and will be be processed by the School for the purpose of ment records. By signing and returning this g of data contained or referred to on it, including
	reprimands or final warnings that are not 75 (as amended in 2013) by SI 2013 1198?	"protected" as defined by the Rehabilitations of Yes No

If yes, please give details of conviction:

* (Answering **Yes** does not necessarily ban you from appointment. If **Yes**, you are required to give details as the post for which you are applying is not "protected" as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order1975 (as amended in 2013). A subsequent offer of appointment will be dependent upon the completion of a satisfactory Disclosure and Barring Service check. Further details are available in the Sherborne School Policy on the Recruitment of Ex-Offenders.)

I hereby certify that the entries on this form are complete and correct to the best of my knowledge. I agree that if my application is successful a DBS check for criminal convictions/actions will be made.

Signed:	Date:	