

**Southfields Academy**  
**Application Form (Confidential)**  
Please refer to the guidance notes  
before completing this application form.  
Please use black ink or typescript.



**Southfields  
Academy**

Principal:  
Ms Jacqueline Valin  
Headteacher:  
Ms Wanda Golinska  
333 Merton Road  
London  
SW18 5JU  
Tel: 020 8875 2600  
Fax: 020 8874 9949  
info@southfields.wandsworth.sch.uk  
www.southfields.wandsworth.sch.uk

We are an Equal Opportunity Employer and welcome applications regardless of race, colour, nationality, ethnic origin, sex, marital status, disability or age. All applicants are considered on the basis of their merits and abilities for the job. The Academy is committed to safeguarding and promoting the welfare of children.

|                              |  |
|------------------------------|--|
| <b>Position applied for:</b> |  |
| <b>Closing Date:</b>         |  |

**1. Personal details**

|                                                                                            |                              |                             |  |
|--------------------------------------------------------------------------------------------|------------------------------|-----------------------------|--|
| <b>Surname/Family Name:</b>                                                                |                              | <b>Title:</b>               |  |
| <b>Forename(s):</b>                                                                        |                              |                             |  |
| <b>Previous names/surnames/ family names:</b>                                              |                              |                             |  |
| <b>Address:</b>                                                                            |                              |                             |  |
|                                                                                            |                              |                             |  |
|                                                                                            |                              |                             |  |
|                                                                                            |                              |                             |  |
|                                                                                            |                              |                             |  |
| <b>Postcode:</b>                                                                           |                              | <b>Home telephone:</b>      |  |
| <b>Mobile telephone number:</b>                                                            |                              | <b>Fax number:</b>          |  |
| <b>Email:</b>                                                                              |                              |                             |  |
| <b>Work telephone number:</b>                                                              |                              |                             |  |
| <b>May we call you at work?</b>                                                            | Yes <input type="checkbox"/> | No <input type="checkbox"/> |  |
| <b>National Insurance Number:</b>                                                          |                              |                             |  |
| <b>Please give dates/times when you will NOT be available for interview e.g. holidays.</b> |                              |                             |  |
|                                                                                            |                              |                             |  |
|                                                                                            |                              |                             |  |
| <b>Please give details of any pension scheme to which you belong.</b>                      |                              |                             |  |
|                                                                                            |                              |                             |  |
|                                                                                            |                              |                             |  |

## 2. Employment history

Please list below all the jobs you have had in the past. Follow on from your answer to question 2 with the next most recent and include details of (a) voluntary work, (b) employment on a temporary contract or via an employment agency (including with the academy). **You must account for all of your time since leaving school and give details of any gaps in employment below.** Please continue on a separate sheet if necessary and attach to your form.

|                              |  |
|------------------------------|--|
| From:                        |  |
| To:                          |  |
| Position:                    |  |
| Duties:                      |  |
|                              |  |
| Employer's name and address: |  |
|                              |  |
|                              |  |
| Telephone number:            |  |
| Reason for leaving:          |  |
|                              |  |
| Salary (on leaving):         |  |

|                              |  |
|------------------------------|--|
| From:                        |  |
| To:                          |  |
| Position:                    |  |
| Duties:                      |  |
|                              |  |
| Employer's name and address: |  |
|                              |  |
|                              |  |
| Telephone number:            |  |
| Reason for leaving:          |  |
|                              |  |
| Salary (on leaving):         |  |

|                              |  |
|------------------------------|--|
| From:                        |  |
| To:                          |  |
| Position:                    |  |
| Duties:                      |  |
|                              |  |
| Employer's name and address: |  |
|                              |  |
|                              |  |
| Telephone number:            |  |
| Reason for leaving:          |  |
|                              |  |
| Salary (on leaving):         |  |

### Periods of Non-Employment

**Please indicate nature/reasons for any periods of non-employment including relevant dates (DD/MM/YY)**

[illegible]

### 3. Education, training and qualifications

Starting with the most recent please provide details and dates for all the educational establishments you have attended. Shortlisted applicants will be required to provide evidence i.e. original certificates, of **all** qualifications listed on the form. You are advised to list qualifications if (1) they are relevant to the job (2) listed in the person specification and/or (3) you can produce original copies of them. *(Please continue on a separate sheet if necessary and attach it to your form)*. Candidates educated abroad must have their qualifications checked for equivalency by UKNARiC.

| Name of School, College/University | Name of Course/Studies | Date taken/ to be taken | Qualification level/ grade obtained |
|------------------------------------|------------------------|-------------------------|-------------------------------------|
|                                    |                        |                         |                                     |
|                                    |                        |                         |                                     |
|                                    |                        |                         |                                     |
|                                    |                        |                         |                                     |
|                                    |                        |                         |                                     |
|                                    |                        |                         |                                     |
|                                    |                        |                         |                                     |
|                                    |                        |                         |                                     |
|                                    |                        |                         |                                     |

### 4. Membership of professional bodies/professional qualifications

Please provide details of your DfCSF, GTC, GSCC or other relevant membership number.

| Name of body | Qualification of membership (class/grade) | Membership number | Date obtained | Gained by examination?     |                            | Still current?             |                            |
|--------------|-------------------------------------------|-------------------|---------------|----------------------------|----------------------------|----------------------------|----------------------------|
|              |                                           |                   |               | Y <input type="checkbox"/> | N <input type="checkbox"/> | Y <input type="checkbox"/> | N <input type="checkbox"/> |
|              |                                           |                   |               | Y <input type="checkbox"/> | N <input type="checkbox"/> | Y <input type="checkbox"/> | N <input type="checkbox"/> |
|              |                                           |                   |               | Y <input type="checkbox"/> | N <input type="checkbox"/> | Y <input type="checkbox"/> | N <input type="checkbox"/> |
|              |                                           |                   |               | Y <input type="checkbox"/> | N <input type="checkbox"/> | Y <input type="checkbox"/> | N <input type="checkbox"/> |
|              |                                           |                   |               | Y <input type="checkbox"/> | N <input type="checkbox"/> | Y <input type="checkbox"/> | N <input type="checkbox"/> |

Please provide your teacher reference number if applying for a teaching post:

Do you have Qualified Teacher Status to teach in England and Wales if applicable.

Y ☐ N ☐

I understand that I must provide original evidence of all qualifications listed above. ☐ please cross

## 5. Further information on knowledge, skills, abilities and experience

**Please use this space, with separate sheets attached if necessary to tell us how you meet the job requirements that are listed in the selection criteria/person specification. You must address ALL the items in the list. Do not attach a CV as it will not be considered. Please refer to the guidance notes on 'Applying for a Job'.**

**Please tell us why you are applying for this post and refer to experience and knowledge gained from previous employment, leisure interests and any other activities which are relevant to this position.**

[illegible]

## 6. Referees

Please provide full details of two referees: one must be your present or most recent employer and the other should be a previous employer. If you have not been in paid employment please give the name of the head of education or training establishment that you attended and/or the manager of a voluntary group for whom you have worked.

**Please note: The academy reserves the right to: (1) seek a reference from any previous employer/school/college or university and, (2) take up more than two references.**

If you are shortlisted:

May we contact your first referee prior to interview?

Yes

☐

No

☐

May we contact your second referee prior to interview?

Yes

☐

No

☐

Name of referee:

Job Title:

Organisation:

Address:

Date of employment/study.

From:

To:

Relationship with referee e.g. line manager:

Telephone number:

Fax number:

Email:

Name of referee:

Job Title:

Organisation:

Address:

Date of employment/study.

From:

To:

Relationship with referee e.g. line manager:

Telephone number:

Fax number:

Email:

Name of referee:

Job Title:

Organisation:

Address:

Date of employment/study.

Relationship with referee e.g. line manager:

Telephone number:

Email:

## 7. Relationship

Are you related to, or a close personal/business association with, any trustee OR any employee of the Academy? **Yes** ☐ **No** ☐

If YES please complete this section. You may attach an additional sheet if necessary.

Person's name:

Position:

Relationship:

## 8. Employment Restrictions

Are there any restrictions or conditions affecting your ability to take up or remain in employment in the UK? E.g. do you require a work permit? Are you a highly skilled migrant or a working holidaymaker? **Yes** ☐ **No** ☐

If YES, please give details (including, if you are already in the UK, details of your current employer, visa/leave to remain, expiry date, certificate of sponsorship number and tier under which you are employed)

If you are offered this job will you have any other paid work?

**Yes** ☐

**No** ☐

If YES, please give the following details:

Employer(S):

Address:

Telephone number:

Date employed from:

To:

Number of hours per week:

Working times/days:

Are these arrangements subject to change e.g. shifts?

**Yes** ☐

**No** ☐

If YES please give details:

## 9. Declaration

The Academy is committed to the safeguarding and promoting the welfare of children and vulnerable adults in its care, and to this end may use the information you have provided on this form to ensure the safeguarding and welfare of children and vulnerable adults. It may also share this information with other bodies responsible for safeguarding and promoting the welfare of children and vulnerable adults for these purposes.

The Academy is also under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

Providing any misleading or false information to support your application or canvassing Academy staff or governors directly or indirectly for an appointment will disqualify you from appointment, or if appointed will render you liable to dismissal without notice.

I hereby declare that I have understood and complied with the requirements laid down in the previous paragraphs.

## DATA PROTECTION ACT 1998

I understand that the information given on this form will be used by the employer, Southfields Academy for:

- the purpose of processing my application for employment,
- monitoring the academy's employment policies; and if my application is successful,
- recording information relevant to my employment.

I understand that any information given relating to racial or ethnic origin, physical or mental health and criminal convictions constitutes sensitive data as defined by Section 2 of the Data Protection Act 1998. I hereby consent to the processing by the academy for the purposes set out above of all information given by me including such information as constitutes sensitive data.

**Signed:**

**Date:**

**Please note: if you are completing this application electronically, you will be asked to sign the form if you are invited to an interview.**

**NOW YOU MUST COMPLETE THE RECRUITMENT MONITORING FORM!**

# Southfields Academy

## Equal Opportunities:

### Recruitment Monitoring Form

(Confidential)



**Southfields  
Academy**

Principal:  
Ms Jacqueline Valin  
Headteacher:  
Ms Wanda Golinska  
333 Merton Road  
London  
SW18 5JU  
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To make sure that recruitment and selection is being carried out fairly and to help check that the Academy's Equal opportunities in Employment policy is working, the Academy records the race, age and disability of people who apply for its jobs. The policy can be provided upon request.

You are asked to provide the following information. Thank you for your assistance.

**Position applied for:**

## 1. Personal details

**Surname/Family Name:**

**Forename(s):**

**Gender:**

**Male** ☐ **Female** ☐

**Please state how you found out about this post:**

**1. Publication (Please state which one):**

**2. Internet (please state search engine or site):**

**The date of birth question has been moved to this form in light of the introduction of the Employment Equality (Age) Regulations.**

**3. Date of Birth:**

**Please read the following carefully before placing a cross in the appropriate box.**

**I would describe myself as being the following:**

**White**

|                          |                             |      |
|--------------------------|-----------------------------|------|
| <input type="checkbox"/> | British                     | WBRI |
| <input type="checkbox"/> | Irish                       | WIRI |
| <input type="checkbox"/> | Traveller of Irish Heritage | WIRT |
| <input type="checkbox"/> | Gypsy/Roma                  | WROM |
| <input type="checkbox"/> | Turkish                     | WTUK |
| <input type="checkbox"/> | White Eastern European      | WEUR |
| <input type="checkbox"/> | White Western European      | WWEU |
| <input type="checkbox"/> | White Other                 | WOWB |

| Mixed                    |                            |      |
|--------------------------|----------------------------|------|
| <input type="checkbox"/> | White and Black Caribbean  | MWBC |
| <input type="checkbox"/> | White and Black African    | MWBA |
| <input type="checkbox"/> | White and Asian            | MWAS |
| <input type="checkbox"/> | Any other mixed background | MOTH |

| Asian or Asian British   |                            |      |
|--------------------------|----------------------------|------|
| <input type="checkbox"/> | Indian                     | AIND |
| <input type="checkbox"/> | Pakistani                  | APKN |
| <input type="checkbox"/> | Bangladeshi                | ABAN |
| <input type="checkbox"/> | Any other Asian background | AOTH |

| Black or Black British   |                            |      |
|--------------------------|----------------------------|------|
| <input type="checkbox"/> | Caribbean                  | BCRB |
| <input type="checkbox"/> | Ghanaian                   | BGHA |
| <input type="checkbox"/> | Nigerian                   | BNGN |
| <input type="checkbox"/> | Somali                     | BSOM |
| <input type="checkbox"/> | Other Black African        | BOTH |
| <input type="checkbox"/> | Any other black background | BAOF |

| Chinese                     |                               |      |
|-----------------------------|-------------------------------|------|
| <input type="checkbox"/>    | Chinese                       | CHNE |
| Any other ethnic background |                               |      |
| <input type="checkbox"/>    | Latin/ South/Central American | OLAM |
| <input type="checkbox"/>    | Any other ethnic background   | OOTH |

|                          |                                                   |      |
|--------------------------|---------------------------------------------------|------|
| <input type="checkbox"/> | Information not obtained                          | NOBT |
| <input type="checkbox"/> | I do not wish an ethnic background to be recorded | REFU |

## Disability

The Academy is keen to encourage disabled people to apply for jobs at the Academy. The following information is sought for two reasons:

- i) for monitoring purposes; and
- ii) to determine any help that you may require at the interview stage.

a) Do you consider yourself to have a disability which is defined in the Disability Discrimination Act 1995 as 'a physical or mental impairment which has a substantial and long term adverse effect on ability to carry out normal day-to-day activities? Yes ☐ No ☐

If Yes please indicate the nature of your disability:

b) Is there anything we need to know about your disability to offer you a fair selection interview? Yes ☐ No ☐

If Yes please give details:

## Rehabilitation of Offenders

Because of the nature of the work within Education, the post for which you are applying will be exempt from the provisions of the Rehabilitation of Offenders Act 1974. You will, therefore, be required to disclose on a separate form (An Enhanced Disclosure and Barring Service Check) all the information about any police cautions or convictions in a Court of Law no matter when they occurred, so that a police check can be carried out if you are offered an appointment. If you are subsequently employed by the Academy and it is found that you failed to disclose any previous convictions, this could result in DISMISSAL, or disciplinary action by the Academy. All information will be treated in confidence and will only be considered in relation to an application for posts to which the exemption order applies.

Please return this form completed together with your application form.