**APPLICATION FORM**

**Application for appointment at:**

**Eccleston Church of England (Aided) Primary School**

Please complete all sections on this form. If any sections do not apply to you, please enter ‘not applicable’. The information provided on the form will be considered by the short-listing panel who will decide whether you proceed to the next stage of the selection process. The equalities monitoring information will be detached from the application prior to short-listing to ensure the process is objective.

Please send your completed application form as a Word document to head@ecclestonprimary.cheshire.sch.

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| **Title of job applied for** |  |

**Personal Details**

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| **Title** |  |
| **First Name** |  |
| **Surname** |  |
| **Former name(s)** |  |
| **Address** |  |
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|  |
| **Post Code** |  |
| **Email Address** |  |
| **Telephone number** |  |
| **Mobile number** |  |
| **Work number** |  |
| **May we contact you at work?** |  |
| **National Insurance number** |  |

**Present or most recent employment**

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| --- | --- |
| **Post held** |  |
| **School/Establishment** |  |
| **Number on roll** |  |
| **Gross salary/Range** |  |
| **Start date** |  |
| **End date/period of notice** |  |
| **Reason for leaving** |  |
| **Description of key duties and responsibilities** |  |

**Previous teaching experience**

(Please give details of all previous positions you have held since leaving school, starting with the most recent first)

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| **Name of school and authority** | **Type of school** | **Number on roll and age range** | **Post held & reason for leaving** | **From** | **Date to** | **Description of key duties and responsibilities** |
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**Previous other employment**

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| **Name of employer** | **Post held** | **Reason for leaving** | **Date from** | **Date to** |
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| **Please give details of any gaps in your employment history** |
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**Qualifications**

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| **Name of educational establishment** | **Qualification taken** | **Grade** | **Date** |
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| **Teacher reference number** |  | **Date:** |

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| **Current memberships of institutions/professional bodies** |
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**Training and Development**

Please provide details of all training and development undertaken relevant to this position within the last three years. Please include details of any membership of professional relevant to this position.

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| **Year Course Taken** | **Course Title** | **Date** | **Provider** |
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**Oher Information**

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| Additional skills e.g. languages sign language, keyboard skills.  Do you have a valid driving licence? Yes  No  If yes, please state type of licence  Does your licence have any endorsements or penalty points? Yes  No  If yes, please give details |

**Relevant skills and experience**

Please use the space below to explain why you are applying for the position and how your experience, personal qualities and skills help to make you a suitable candidate. It is essential that you provide us with details that demonstrate how you meet the criteria on the person specification. This should be no more than 2 A4 sides.

**Criminal Convictions**

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| The Rehabilitation of Offenders Act allows for a person who has been convicted of a criminal offence involving a sentence of not more than 2½ years imprisonment and who has since lived trouble free for a specified period of time (related to the severity of the offence) to be treated as if the offence, conviction or sentence had never occurred. This is known as a spent conviction.  The job for which you are applying is one of those to which the provisions of the above Act in relation to spent convictions, do not apply. You must therefore disclose whether you have any previous convictions, whether or not they are spent.  Should you identify that you have a criminal conviction, this will be discussed in confidence at interview. However, you should note that only convictions that are relevant to the job in question will be taken into account.  Do you have any criminal convictions whether spent or unspent? Yes  No  If yes please state:  If you do not disclose any conviction you have it could lead to your application being rejected, or, if you are appointed, may lead later to your dismissal. If between the completion of this application form and taking up a job within this School you are convicted of a criminal offence you must inform the School of this.  People who have convictions will be treated fairly and given every opportunity to establish their suitability for the job. All applicants will be considered on merit and ability.  Any information that you give will be kept in strict confidence and will be used only in respect of your application for the job. Disclosure and Barring Service (DBS) Successful applicants will be asked to apply for a Disclosure from the Disclosure and Barring Service (DBS).  A copy of the Disclosure and Barring Service Code of Practice is available on request.  Further information about the Disclosure process can be found at www.disclosure.gov.uk |

**Department for Education (DfE) Teaching Agency**

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| Have you ever been referred to the DfE on misconduct grounds and/or are subject to a reprimand and/or a conditional resignation order?  Yes  No  If yes, please state: |

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| Are you related to or have a close relationship with any existing employee of the School or Governors?  **If yes, please provide details of their name, job title and your relationship with them.** |

I confirm that I am not included on the (ISA List 99) of people formally barred from working in schools, disqualified from working with children, or subject to sanctions imposed by a regulatory body. I certify that the information given by me on this Application Form is true to the best of my knowledge and I understand that if I am appointed and such information is subsequently found to be materially incorrect, the school will be entitled to terminate my employment without notice.

To comply with the Equality Act 2010, we have not requested information about your sickness absence record. You should be aware that regular attendance at work is an essential requirement of this role and therefore we will be seeking confirmation of your sickness absence record with your current or past employer should you be offered the position.

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| **Signed:**  **Date:** |

**References**

Please give details of three referees, one of whom must be your present and/or last employer and the other from a previous employer. Your referees must have knowledge of your work and character. Both referees should ideally be senior people in your organisation. To comply with safer recruitment practices, references will be taken up on all shortlisted candidates, where you have confirmed that the referee can be approached at the stage.

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| **Referee One – current or previous employer** | | |
| If you are invited for interview may we approach this referee without further reference to you? | | Yes/No |
| **Name Title** |  | |
| **Address** |  | |
| **Telephone number** |  | |
| **Email address** |  | |
| **Occupation** |  | |
| **Relationship to you** |  | |

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| **Referee Two** | | |
| If you are invited for interview may we approach this referee without further reference to you? | | Yes/No |
| **Name Title** |  | |
| **Address** |  | |
| **Telephone number** |  | |
| **Email address** |  | |
| **Occupation** |  | |
| **Relationship to you** |  | |

Please give the name and address of a suitable person who will be asked about your religious commitment.

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| **Referee Three** | | |
| If you are invited for interview may we approach this referee without further reference to you? | | Yes/No |
| **Name Title** |  | |
| **Address** |  | |
| **Telephone number** |  | |
| **Email address** |  | |
| **Occupation** |  | |
| **Relationship to you** |  | |

**Data Protection**

The information supplied on this form is being collected as part of the school’s recruitment and selection procedures. If you are successful with your application the information will also be used for the determination and payment of salary and to produce a Statement of Particulars. When you complete this form you are giving your consent to the school to hold and use personal information for these purposes. The information you provide may also be disclosed to relevant statutory bodies. The application forms of successful candidates will be retained for six months, after which time they will be destroyed.

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| C:\Users\suenoakes\Pictures\DBE logo.png  **Confidential**  Application Form  Part 2 | | | |
| **Equal Opportunities Monitoring** | |
| The School recognises and actively promotes the benefits of a diverse workforce and is committed to treating all employees with dignity and respect regardless of race, gender, disability, age, sexual orientation, religion or belief. We therefore welcome applications from all sections of the community.  The information below will be used only for monitoring purposes and not in the selection process. Please tick correct boxes:  **Sex:** Male  Female  Prefer not to say  **Marital status**: Married  Not married  Prefer not to say  **Date of birth:** Age: | | | |
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| **Ethnic Origin:** How would you describe your ethnic origin? | | | |
| White | English, Scottish, Welsh, Northern Irish | |  |
|  | Irish (Republic of) | |  |
|  | Any other White background (please state) | |  |
| Mixed | White and Black Caribbean | |  |
|  | White and Black African | |  |
|  | White and Asian | |  |
|  | Any other Mixed background (please state) | |  |
| Asian or Asian British | Indian | |  |
|  | Pakistani | |  |
|  | Bangladeshi | |  |
|  | Any other Asian background (please state) | |  |
| Black or Black British | Caribbean | |  |
|  | African | |  |
|  | Any other Black background (please state) | |  |
| Chinese or other Ethnic Group | Chinese | |  |
|  | Any other background (please state) | |  |
| **Disability** | | | |
| ticksThe Disability Discrimination Act of 1995 made it unlawful for employers to discriminate against their employees who are disabled, and places a duty on the employer to make reasonable adjustments to enable the employee to undertake the work. The definition in the Act is “People with disabilities are individuals who have, or have had, a physical or mental impairment which has a substantial and long-term effect on his or her ability to carry out normal day to day activities”. If you do consider yourself to be disabled under the definition in the Act, please indicate this, even if you do not currently need any adjustments to undertake your job.  Do you consider yourself to have a disability? Yes  No | | | |