



Please complete this form electronically (please add rows as necessary)

Please state where you first saw/heard of this vacancy:	

Surname	Mr/Mrs/Ms/Miss/Dr	Previous Name(s)	
First Name(s)			
Address			
Email			
Home Telephone		Mobile Telephone	Work Telephone
DfE Reference Number		National Insurance Number	

Secondary Education - Name of Institution(s)		From	To
1			
2			
Qualifications Obtained			
GCE 'O' Level/GCSE (or equivalent)		Grades	Dates
'A' Levels (or equivalent)			

University/College etc.	Date		Subject(s) (Main and Subsidiary)	Full/Part Time	Qualification Result	Date of Award
	From	To				

Have you got Qualified Teacher Status?	Yes	No

<b>Are you eligible to work in the UK?</b>	Yes	No
If no please provide details in the box below.		

**CURRENT EMPLOYER** (Applicants applying for first teaching post should list teaching practice experience)

Salary Point		Leadership/Recruitment Point(s)		Salary Per Annum	£	Date available from	
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Name and Type of School (e.g. comprehensive, grammar, non-selective, public)	NoR	Age Range of Pupils	Post Held (including Acting Appointments)	Subjects Taught	Date of Paid Service				Reason for Leaving	Part – time Proportion
					From		To			
					M	Y	M	Y		

**TEACHING EMPLOYMENT HISTORY** (Please explain any gaps in your employment history).

Name and Type of School (e.g. comprehensive, grammar, non-selective, public)	NoR	Age Range of Pupils	Post Held (including Acting Appointments)	Subjects Taught	Date of Paid Service				Reason for Leaving	Part – time Proportion
					From		To			
					M	Y	M	Y		

**OTHER EMPLOYMENT HISTORY**

Other Employers	Post Held	FT/PT	Reason for Leaving	From		To	
				M	Y	M	Y

**CONTINUED PROFESSIONAL DEVELOPMENT** (Please give details of courses and training attended in the last three years)

Title of Course/Training	Dates and Duration	Name of Provider	Qualification Obtained (if any)

**CONTINUED PROFESSIONAL DEVELOPMENT** (Continued)


**PERSONAL STATEMENT**

*Please provide a personal statement outlining the reasons why you wish to be considered for this position on a separate sheet of paper.*

**DISCLOSURE OF RELATIONSHIP**

Are you related by marriage, blood or as a co-habitee to any member of the School Governing Body, Current Employee or Volunteer?	Yes	No
If YES, please state the name, relationship and position held:		

**SUPERANNUATION SCHEME**

Do you contribute to the Teacher's Superannuation Scheme?	Yes	No
If you contribute to another scheme give details		

**PROTECTION OF CHILDREN (DISCLOSURE OF CRIMINAL BACKGROUND OF THOSE WITH ACCESS TO CHILDREN IS REQUIRED.)**

Have you ever been convicted of a criminal offence? (Answering YES does not necessarily ban you from appointment).	Yes	No

**CRIMINAL CONVICTIONS OR CAUTIONS**

It is an offence for an individual to attempt to engage in regulated activity (working with children). As a result, an individual would be unable to carry out the advertised role if they have certain criminal convictions.

As part of the application process, we ask candidates about whether they have any criminal convictions that would prevent them from fulfilling the role. This is to ensure the candidate is suitable to work for the school. The school are also required to carry out a DBS check in order to determine your suitability for the role.

Having a criminal record will not necessarily bar you from working with us. We will take into account the circumstances and background of any offences and whether they are relevant to the position in question, balancing the rights and interests of the individual, our employees, pupils, parents, suppliers and the public.

We will treat all applicants, employees and volunteers fairly but reserve the right to withdraw an offer of employment if you do not disclose relevant information, or if a DBS check reveals information which we reasonably believe would make you unsuitable for the role. The amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are "protected" and are not subject to disclosure to employers and cannot be taken into account.

If you have any convictions, cautions, reprimands or final warnings that are not "protected" as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013) please complete information below:

Date	Offence	Sentence

## CONSENT TO SEEK REFERENCES

I **consent/do not consent** (delete as appropriate) that the school may seek my references in advance of interview should I be successfully shortlisted for interview.

I **consent/do not consent** (delete as appropriate) that the school may seek my references after interview.

Signature:

Date:

## REFEREES (Testimonials are not required).

Please give the names and addresses of two referees who can be consulted regarding your suitability for the post. One of the referees should be your present or most recent employer. Students should include their College Principal. All offers of employment are subject to satisfactory references being secured. (Please note that we reserve the right to approach any of your previous employers for references if necessary.)

1	Name	Mr/Mrs/Ms/Miss/Dr
	Role	
	Address	
	Telephone Number	
	Email	
2	Name	Mr/Mrs/Ms/Miss/Dr
	Role	
	Address	
	Telephone Number	
	Email	

## CONSENT TO RETAIN INFORMATION

I **consent/do not consent** (delete as appropriate) that the information contained may be held by the school for any future vacancies.

Please also refer to our privacy notice on the schools website within *About us – Documents and policies*

Signature:

Date:

## DECLARATION

I declare that the information I have given in support of my application is, to the best of my knowledge and belief, true and complete. I can confirm that I am not on any ISA barred lists and that I consent to the School processing all of the information supplied. I understand that if it is subsequently discovered that any statement is false or misleading or that I have withheld relevant information or canvassed my application it may lead to disqualification or, if I have been appointed, I may be dismissed.

Signature:

Date:

**EQUAL OPPORTUNITIES AND DISABILITY STATEMENT**  
**PLEASE RETURN FORM IN ENCLOSED ENVELOPE WITH YOUR APPLICATION.**

**POST APPLIED FOR:**

This section of the application is **CONFIDENTIAL** and will be detached from your application. It is solely for monitoring purposes. You do not need to complete this form, however the more information that is provided, the more effective the School's equal opportunities monitoring will be.

If you are offered an interview, we have a policy of providing appropriate access and equipment to ensure that disabled people are considered on an equal basis. If you would like any further assistance or advice about this application we will try to help.

**Ethnic Group** (These are approved by the commission for Racial Equality). Please tick:

White							
British		Irish		Any other white background*			
Mixed							
White and Black Caribbean		White and Black African		White and Asian		Any other mixed background	
Black or Black British:							
Caribbean		African		Any other Black background*			
Asian or Asian British:							
Indian		Pakistani		Bangladeshi		Any other Asian background*	
Chinese or Other Ethnic Group:							
Chinese		Other Ethnic Group*					

\*Please specify:

Gender:

Date of Birth:

Religion:

Sexual Orientation:

Do you consider yourself to be disabled? **YES/NO**

If YES, do you consider yourself to be disabled under the terms of the Disability Discrimination Act? **YES/NO**

The Equality Act defines disability as "a physical or mental impairment which has a substantial and long-term adverse effect on an individual's ability to carry out normal day-to-day activities."

Is there anything you would particularly like to tell us about your disability?

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I give my consent to the School to process my information and store any information in accordance with the General Data Protection Regulations 2018.

Signed..... Date .....