

**APPLICATION FORM**

Please fill in **all** **relevant** **sections** of the form using **black ink**/type. The information you provide will help us make a fair decision in the selection process. **Please note,** **CV’s are not accepted.** Applications received after the closing date will not normally be considered. Applications should be returned to:

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| **POSITION TITLE:** |  |
| **WHERE DID YOU SEE THIS POST ADVERTISED?** |  |

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| **HOW WE PROTECT YOUR PERSONAL INFORMATION:** |
| We keep on file information from this application form, equal opportunities form and any documents you attach. This is required for recruitment and equal opportunities monitoring purposes, the payment of staff and the prevention and detection of fraud. All information will be dealt with in accordance with data protection legislation and will not be sold to any third party. Unsuccessful application forms will be destroyed after 6 months; anonymised data will be kept for monitoring purposes |

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| **PERSONAL DETAILS:** | | | |
| Title |  | Surname |  |
| First name(s) |  | Previous Surname (if applicable) |  |
| Home address |  | Home Tel No: |  |
| Mobile No: |  |
| Email address: |  |
| Work Tel |  |
| Postcode |  | NI Number |  |

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| **GENERAL INFORMATION** |
| If you have a disability, can we make any particular interview arrangements (e.g. signer, ground floor interview room etc) to assist you if shortlisted? |
| If yes, please specify here: |
| Are there any dates that you would be unable to attend an interview? |
| If yes, please specify here: |
| ***Please assume if you have not heard from us within 28 days of the closing date that on this occasion you have not been shortlisted for this position.*** |

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| **EQUAL OPPORTUNITIES MONITORING FORM** |

The Federation takes it duty to promote equality and to celebrate diversity in our community very seriously. We are keen to gather and use information about job applicants and the workforce in order to continually improve our employment policies and to remove barriers to and within employment. This information will not be used in the selection process. If you require help to fill in this form please do not hesitate to contact us.

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| **Position applied for** |  | |
| **Grade or Hourly Rate** |  | **Full Time Post / Part Time Post**  Please select |

**If you do not wish to answer any questions, please leave them blank**

**Age – What age are you?** Please select

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| 16 or under | 17 – 24 | 25 – 35 | 36 – 45 | 46 – 55 | 56 – 65 | 66 & over |

**Gender – What is your gender?** Please select

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| Female |  | Male |  |  |  |  |

**Ethnicity – What is your ethnic group?**

Please read through carefully before selecting the ethnic group that you feel most closely reflects your background**.**

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| **White** | | | | | | |
| British |  | Cornish |  | Irish |  |  |
| Gypsy |  | Roma |  | Travellers of Irish Heritage |  |  |
| Other white background (please specify): | | | |  | | |

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| **Mixed** | | | | | | |
| White & Asian |  | White & Black African |  | White & Black Caribbean |  |  |
| Mixed Cornish |  |  | | | | |
| Other mixed background (please specify): | | |  | | | |

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| **Black or Black British** | | | | | | | |
| African |  | Caribbean |  | Cornish | |  |  |
| Other Cornish background (please specify): | | | | |  | | |

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| **Asian** | | | | | | | | |
| Bangladeshi |  | Chinese |  | Indian | |  | Pakistani |  |
| Cornish |  |  |  |  | |  |  |  |
| Other Asian background (please specify): | | | | |  | | | |

**Disability**

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| Do you consider you qualify for protection under the Equality Act 2010? | **Yes / No**  Please select | |
| If the answer is Yes, it would help us to know any barriers you have faced when dealing with us. Please also use this space to make suggestions on how we can improve…. | |  | |
| I do not wish to disclose this information | |  | |

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| **REFERENCES:** | | | | | | | | |  | | | | | | | | | |
| **Please provide 2 references**. Do not use friends or relatives.  We will ask for references before your interview, With all references we will ask for information about past disciplinary issues and whether you have been subject to any child/vulnerable adult protection concerns and the outcome of any enquiry or disciplinary procedure (including any in which the time penalty is ‘time expired’). If you have any concerns, please contact us. | | | | | | | | | | | | | | | | | | |
| **Reference 1**: This **must** be your current or most recent employer or, if you do not have any previous employment, your most recent tutor (Academy, college or university). | | | | | | | | | **Reference 2**: If you have worked with children, young people or vulnerable adults in the past, but are not currently, this **must** be the most recent employer with whom you were employed to work with these vulnerable groups. Otherwise, a referee of your choice. | | | | | | | | | |
| Job Title: | | |  | | | | | | Job Title: | |  | | | | | | | |
| Employer | | |  | | | | | | Employer | |  | | | | | | | |
| Address | | |  | | | | | | Address | |  | | | | | | | |
| Postcode | | | | |  | | | | Postcode | | | | |  | | | | |
| Email | | | | |  | | | | Email | | | | |  | | | | |
| Professional relationship to you | | | | |  | | | | Professional relationship to you | | | | |  | | | | |
| Did this role involve working with young people and /or vulnerable adults? | | | | | **Yes / No**  Please select | | | | Did this role involve working with young people and /or vulnerable adults? | | | | | **Yes / No**  Please select | | | | |
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| **QUALIFICATIONS ACHIEVED FROM SECONDARY, FURTHER AND HIGHER EDUCATION** | | | | | | | | | | | | | | | | | | |
| **Awarding body** | | | | | **Level and subject of qualifications**  **(eg O Level, GCSE, A Level, degree, teaching qualifications)** | | | | | | | | | | **Grade awarded** | | | **Year achieved** |
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| **TRAINING & DEVELOPMENT RELEVANT TO THE POST APPLYING FOR:** | | | | | | | | | | | | | | | | | | |
| **Name of training & development course (e.g. first aid, health and safety, child protection, risk assessments etc)** | | | | | **Provider/Awarding body** | | | | | | | | | | **Grade** | | | **Year achieved** |
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| **COMPLETE THIS SECTION IF APPLICABLE** | | | | | | | | | | | | | | | | | | |
| Do you have Qualified Teacher Status? | | | | | | | | | | | | | | | **Yes / No**  Please select | | | |
| Date achieved | | | | |  | | | | | | | | | | | | | |
| DFE Teacher reference number | | | | |  | | | | | | | | | | | | | |
| Statutory induction period (if qualified after 7 May 1999) | | | | | | Started: | | | | | | | Completed: | | | | | |
| Are you subject to any conditions or prohibitions placed on you by the GTC  (or other) in the UK? | | | | | | | | | | | | | | | **Yes / No**  Please select | | | |
| If Yes, please enclose details with dates in a sealed envelope and attach to this form. | | | | | | | | | | | | | | |  | | | |
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| **EMPLOYMENT HISTORY** | | | | | | | | | | | | | | | | | | |
| **Note:** If you are currently working through a supply agency, please ensure you also provide the name of the agency under “Employer’s name and address”.  If you are applying for your first job, please provide any voluntary work/work experience in the “Previous employment or experience” section. | | | | | | | | | | | | | | | | | | |
| Employer name | | | | |  | | | | Job title | | |  | | | | | | |
| Employer  address | | | | |  | | | | Salary | | |  | | | | | | |
| Start date | | |  | | | | | | |
| Leave date  (if applicable) | | |  | | | | | | |
| Reason for leaving | | | | |  | | | | | | | | | | | | | |
| Main duties and responsibilities | | | | |  | | | | | | | | | | | | | |
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| **PREVIOUS EMPLOYMENT OR EXPERIENCE** | | | | | | | | | | | | | | | | | | |
| Start with your most recent employment first and work backwards.  You must explain any gaps in your work history since you left education (e.g. unemployment; career breaks; voluntary work; travel). | | | | | | | | | | | | | | | | | | |
| **Dates**  **(dd/mm/yy)** | | | | **Name of Academy/Employer**  **and Address**  **or**  **Reason for gap in employment** | | | **Job title, duties & responsibilities** | | | | | | | | | **Reason for leaving** | | |
| **From** | **To** | | |
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| **YOUR SUPPORTING STATEMENT** | | | | | | | | | | | | | | | | | | |
| Please refer to the job description supplied and tell us how your skills and experience match. Use examples where possible and provide the situation or task, your action(s) and the result.  If you are applying for your first job, provide examples of other relevant experience that will help us decide your suitability, eg gained through training, education, the community etc. Please continue on separate sheet – up to 2 sides of A4 maximum. | | | | | | | | | | | | | | | | | | |
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| **SAFEGUARDING CHILDREN, YOUNG PEOPLE & VULNERABLE ADULTS** | | | | | | | | | | | | | | | | | | |
| We are committed to safeguarding children, young people and vulnerable adults. From your training and/or experience, please give examples which demonstrate your knowledge and commitment to safeguarding and how you would ensure these vulnerable groups remain in a safe environment. **Word Limit: 200 words** | | | | | | | | | | | | | | | | | | |
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| **DECLARATION OF CRIMINAL CONVICTIONS:** | | | | | | | | | | | | | | | | | | |
| Do 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)](http://www.legislation.gov.uk/uksi/2013/1198/pdfs/uksi_20131198_en.pdf)? | | | | | | | | | | | | | | | | | | |
| If yes, please provide details: | | | | | | | | | | | | | | | | | **Yes / No**  Please select | |
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| Have you ever been cautioned, reprimanded or received a final warning which although not considered to be criminal convictions and become ‘spent’ immediately, must be considered in relation to this exempt post? | | | | | | | | | | | | | | | | | **Yes / No**  Please select | |
| If yes, please provide details:  *Any subsequent offer of employment will be subject to a criminal record check (disclosure request) from the Disclosure and Baring Service (DBS).*  *This check will include details of cautions, reprimands or final warnings as well as convictions. Appointment will be subject to the information received from the DBS.* | | | | | | | | | | | | | | | | | | |
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| I accept that if any of the information is found to be false or misleading this may result in any offer of employment being withdrawn. I understand that any subsequent offer of employment will be subject to the outcome of a criminal records check (enhanced with list checks) from the Disclosure and Baring Service. | | | | | | | | | | | | | | | | | | |
| **Signature** | |  | | | | | | **Date** | |  | | | | | | | | |
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| **DISCLOSURE OF INTEREST:** | | | | | | | | | | | | | | | | | | |
| Are there any restrictions to you living and working in the UK which might affect your right to work for us (e.g. needing a work permit/visa)? | | | | | | | | | | | | | | | | | **Yes / No**  Please select | |
| If yes, please provide details: | | | | | | | | | | | | | | | | | | |
| **The role information supplied will say if this post requires travel and, if so, if you need access to transport and/or a full current UK driving licence.** | | | | | | | | | | | | | | | | | | |
| If needed, do you have access to transport? | | | | | | | | | | | | | | | | | **Yes / No**  Please select | |
| If needed, do you have a full current UK driving licence? | | | | | | | | | | | | | | | | | **Yes / No**  Please select | |
| The Working Time Regulations (1998) require us to check the hours worked by employees. Would this role be your only employment? | | | | | | | | | | | | | | | | | **Yes / No**  Please select | |
| If no, please provide details of your other role(s) and the days and hours you work: | | | | | | | | | | | | | | | | | | |
| **Canvassing of our Governors and employees** (asking them to help you get this role), directly or indirectly, for any appointment will disqualify your application. If you fail to declare any relationship with a Governor or employee at the Academy your application may be disqualified and, if appointed, you may be dismissed without notice. | | | | | | | | | | | | | | | | | | |
| Are you related to, or have you formed any relationship (personal, financial or professional) with any current Governor or employee at the Academy. | | | | | | | | | | | | | | | | | **Yes / No**  Please select | |
| If yes, please provide details: | | | | | | | | | | | | | | | | | | |
| Do you, your partner or family have any interests (personal, financial or professional) that may conflict with you doing this role? | | | | | | | | | | | | | | | | | **Yes / No**  Please select | |
| If yes, please provide details: | | | | | | | | | | | | | | | | | | |
| Have you ever been the subject of a formal disciplinary procedure?  Have you ever been dismissed from any previous employment? | | | | | | | | | | | | | | | | | **Yes / No**  Please select | |
| If yes, please provide details: | | | | | | | | | | | | | | | | | | |
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| **YOUR DECLARATION:** | | | | | | | | | | | | | | | | | | |
| I understand that any employment, if offered, will be subject to the information on this form being correct and I confirm that no valid information has been wilfully withheld. I understand that if I am appointed, I am liable to dismissal without notice if the information on this form is later proved to be inaccurate. | | | | | | | | | | | | | | | | | | |
| **Signature** | | | | | | | | **Date** | | | | | | | | | | |
| Please sign and date if you are returning the form by post. If returning by email, you will be asked to sign a copy before any offer of employment is made. | | | | | | | | | | | | | | | | | | |
| **If you have completed this form on behalf of the applicant, please add your details:** | | | | | | | | | | | | | | | | | | |
| Name (printed) | | | | | | | | Contact number | | | | | | | | | | |