

Application Form

Applicant Surname (CAPITAL LETTERS):	

Please return your completed application form to recruitment@seacademytrust.co.uk

Thank you for your interest in this post.

The following information is necessary to ensure that full consideration can be given to all candidates. The information given will be treated as confidential.

Please complete all sections on the application form, incomplete applications will not be considered. The Declaration must be signed and dated and this can be found on the end of this form.

If you have any special requirements and/or require reasonable adjustments to enable you to complete this form and/or during the recruitment process please contact recruitment@seacademytrust.co.uk.

We encourage you to submit your application at your earliest convenience as we reserve the right to close this job opportunity early.

Deat Dataile	Section 1
Post Details	
Application for appointment as:	
School:	
Reference no. (if applicable)	
Treference no. (ii applicable)	
Closing date:	

Personal Details		Section 2
Last name and title:	First name (s):	
Previous names:	Date of birth:	
Home telephone no:	Home email address:	
Work telephone no:	Work email address:	
Address:		
	National Insurance no:	
Do you have the right to work in the UK?	Yes No	
Present Employment (if currently	v employed)	Section
Present Employment (if currently Employer's name and address (if applicable		Section
Employer's name and address (if applicable		Section
Employer's name and address (if applicable):	
Employer's name and address (if applicable Nature of business: Current post title:	Date appointed:	
	Date appointed:	

					Section 5	_
Previous	Employme	ent			Section 3	
nd continu	e on a separa	ate sheet if				1113
mployer	Start date	End date	Job Title	Reas	on for leaving	

Brief outline of duties in your current or most recent job

	ork, training.				Section 6
Start date	End date	Reas	son for break		
Ability to t	ravel (if requi	red)			Section 7
)o vou have a	valid driving licence	<u>.</u> ?		Yes	No
	-		on able to use forwards		
ourposes?	ccess to a venicle w	nich you a	are able to use for work	Yes	No
f not, are you a ransport?	able to travel, for wo	ork purpos	es, by another means of	Yes	No
Secondary	/ School Educ	cation (please list most rece	nt first)	Section 8
School(s)	From	То	Qualification/subject obtained and awardined body		Dates

Continuing Educa	tion (Univer	sity/College/Annren	ticachine atc)	Section
Please list most recent	•	sity/College/Applett	tiocompo cto.)	
ducation Establishments	From To	Qualification/sub obtained and aw body	,	Grade Dates
Professional Qual		sociation membersh	ip	Section 1
Do you hold Qualified Tea	cher Status (Q	ΓS)?	Yes	No
Teacher Reference Number	er:			
f vos places comple	to the follow	ina:		
Date NQT/Early Career Te	eacher Statutory	y Induction Period comp	` •	,
Date NQT/Early Career Te	eacher Statutory		` •	,
f yes please completed by the NQT/Early Career Testarted:	eacher Statutory	y Induction Period comp Completed:	` ·	Section 1
Date NQT/Early Career Te	eacher Statutory	y Induction Period comp Completed:	tivities atten	Section 1
Oate NQT/Early Career Te Started:Other relevant tra in the last five ye	eacher Statutory aining and ars nt first and cont	y Induction Period comp Completed:	et if necessary.	Section 1

Information in support of this application

Section 12

Please use the person specification as a prompt to describe the experience, skills, competencies and qualifications that make you suitable for this job. These may have been gained from your work experience, any voluntary or community work or any other organisation you may have been involved with. You should ensure that any information submitted reflects your experience relating to the competencies that are detailed in the Person Specification (please continue on a separate sheet if necessary). If you are a teacher, please provide details of any specialist teaching experience/skills you possess that may be relevant to the post.

References Section 13

Please give the name and addresses of your two most recent employers (if applicable). If you are unable to do this, please clearly outline who your referees are. In the case of school references, this should be the Headteacher (or the Chair of Governors for Headteacher applications). Applicants must ensure referees consent to be contacted and for reference information to be held for a period of 6 months.

1) Name:	2)	Name		
Position:		Position:		
Address:		Address:		
Telephone number:		Telephone number:		
Relationship between referee and applicant:		Relationship between referee and applicant:		
Period of time applicant kno	wn to referee:	Period of time applicant known	n to referee:	
Email address:		Email address:		
Note: (i) Referees will be	contacted before inter-	views.		
(ii) If either of your r	eferees know you by a	nother name please give details	S.	
(iii) The school may	contact other previous	employers for a reference with	your consent.	
(iv) References will r		elatives or from people writing so	olely in the	
Close Personal Relati	onships		Section 14	
Are you a relative or partner, or or Governor of the establishmer or employee of Essex County C relationship (see notes below).	nt to which your applica	ation is being made (or to any C	ounty Councillor	
		Yes	No	
Failure to disclose a close perso Canvassing of Governors, Trus County Council by or on your be	tees, County Councillo		hool/Essex	

Disclosures

Shortlisted candidates will be asked to complete a Self-Disclosure Form (SD2) to disclose whether:

- they have any unspent conditional cautions or convictions under the Rehabilitation of Offenders Act 1974; or
- they have any adult cautions (simple or conditional) or spent convictions that are not protected as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2020.
- they are subject to any prohibitions relevant to the role

The amendments to the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (2013 and 2020) provides that when applying for certain jobs and activities, certain convictions and cautions are considered 'protected'. This means that they do not need to be disclosed to employers, and if they are disclosed, employers cannot take them into account. Guidance notes are available to accompany the SD2 form to assist candidates with information which must be disclosed. Any information disclosed will be treated in the strictest confidence.

Where appropriate for the role, a disclosure/status check will be sought from the Disclosure and Barring Service (DBS) in the event of a successful application, along with other relevant pre-employment checks.

Shortlisted candidates applying for a relevant post in a school setting covered by the Childcare (Disqualification) Regulations 2018 ("the Regulations") will be asked to complete a Disqualification Declaration Form.

A disqualified person may only be employed in a relevant post if they obtain a waiver from Ofsted. A copy of the Disqualification Declaration Form is available from the school office if you wish to review this Form prior to submitting your application.

Safer Recruitment Declaration

It is unlawful for a person who is barred from working with children to apply to work in a regulated position.

I certify that I am not disqualified from working with children or subject to
any sanctions imposed by a regulatory body which would prohibit or
restrict me from applying for this post.

Data Protection

I acknowledge that by completing this form the school will hold and process personal data (including special categories of data e.g. information about health) about me in line with their data protection policy. I acknowledge that the school will use/process this information for the duration of the recruitment process. I acknowledge this information will only be shared in line with the Privacy Notice.

If I am the successful applicant, I acknowledge that this information will be retained in line with the school's retention schedule. If I am not the successful candidate, I acknowledge this information will be retained by the school in a secure electronic/paper system for no longer than 6 months from the date of the appointment of the successful candidate.

All forms submitted (in paper or electronic format) will be held securely by the school in line with their data protection policy.

Declaration and Signature

Please read the following statement and information relating to your application carefully.

By ticking the box below, signing and submitting this form you are certifying that the information you have supplied is accurate and confirming that the declarations are true to the best of your knowledge. Any false information will result in the withdrawal of any offer of employment or, in the event of employment, in disciplinary investigation by the school which may result in dismissal.

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	I certify that the information I have supplied on this form is accurate and true to the best of my knowledge.
Nam	e: Date:
Signe	ed:
	s form is submitted electronically you may be asked to sign a physical form if application is progressed.

Thank you for applying for this post and your interest in working for this school. It is

not our normal practice to acknowledge receipt of applications.