

Candidate Ref	

## **APPLICATION FORM**

School Name:			
Application for the Post of:		Job Ref number:	
rsonal Information			
First Name(s):		Last Name:	
Previous Name(s): if applicable)			
National Insurance Number:			
Address:			
Email address:		Home Telephone Number:	
Mobile Telephone Number:		Work Telephone Number:	
o be completed if the job rec	uires driving or requires you	to be mobile across sites/geo	graphical area.
Do you have a full current di		Yes No	
Do you have daily use of a v	ehicle?	Yes No	
Do you have any penalty po	ints on your licence?	Yes No	
If yes, please further informations (specify the number of points)			
The organisation welcomes disability to participate in the	applications from disabled posselection and interview proc	eople. Do you require any adju	ustments because of a

	his job?			
Are you applying on a Job S	hare basis?	Yes 🗌	No 🗌	
If so, please state the proportime you are willing to work:  mployment History	rtion of full-			
esent or Most Recent Emp	oloyment			
Job Title:				
Start Date:		End date: (if applicable)		
Employer's name, address and telephone number:				
Grade/Salary:		Allowances: (please specify)		
Notice required:		Reason for leaving:		

## **Employment History**

Provide details of your employment history, starting with your most recent / current employer and working back. Please account for any gaps. Continue on a separate sheet if necessary.

Employer		
Job Title		
Start Date (dd/mm/yy)	End Date (dd/mm/yy)	
Reason for Leaving		
Address of employer / brief details of duties and responsibilities		
Employer		
Job Title		
Start Date (dd/mm/yy)	End Date (dd/mm/yy)	
Reason for Leaving		
Address of employer / brief details of duties and responsibilities		
Employer		
Job Title		
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Employer		
Job Title		
Start Date (dd/mm/yy)	End Date (dd/mm/yy)	
Reason for Leaving		
Address of employer / brief details of duties and responsibilities		
<b>Gaps</b> If you have any gaps in your empuse this section to provide details	ployment/education history or if you have lived/travelled oversees places.	ease
I.		

Qualifie	d Teach	ner Information							
		for Teacher positions only eacher Status gained:							
Teache	r Registi	ration number:							
		after 7th May 1999, have your induction year?	Ye	s 🗌 N	No 🗌	If yes,	give date:		
*For Train	nees only	1						_	
Have yo	ou passe	ed your skill tests?	Nume	eracy 🗌	Lit	teracy [		ICT 🗌	
If not, w	vhen do	you expect to complete them'	?						
Successfu	ul applica	ants will be required to provide	e evide	nce of their	egistratio	on with th	e Teaching	Agency	
		ualifications			J		J	0 ,	
NI-			D		\=!: <b>f</b> :==#:	/	D A		i
Na	ame of P	rofessional Association		ofessional C mbership & mm	Date Obta		By Awa	rd or Exam	ination
Education	on Histo	ory							
Please giv	Please give details of all nationally recognised qualifications awarded / results awaited, from GCE Advanced Level to Further Degree Level or their equivalents in chronological order.								
		·						,	
Date from mm/ yy	Date to mm/ yy	Name of School/College		Qualificat	ion	Su	bject	Grade/ Level	Date gained mm/yy

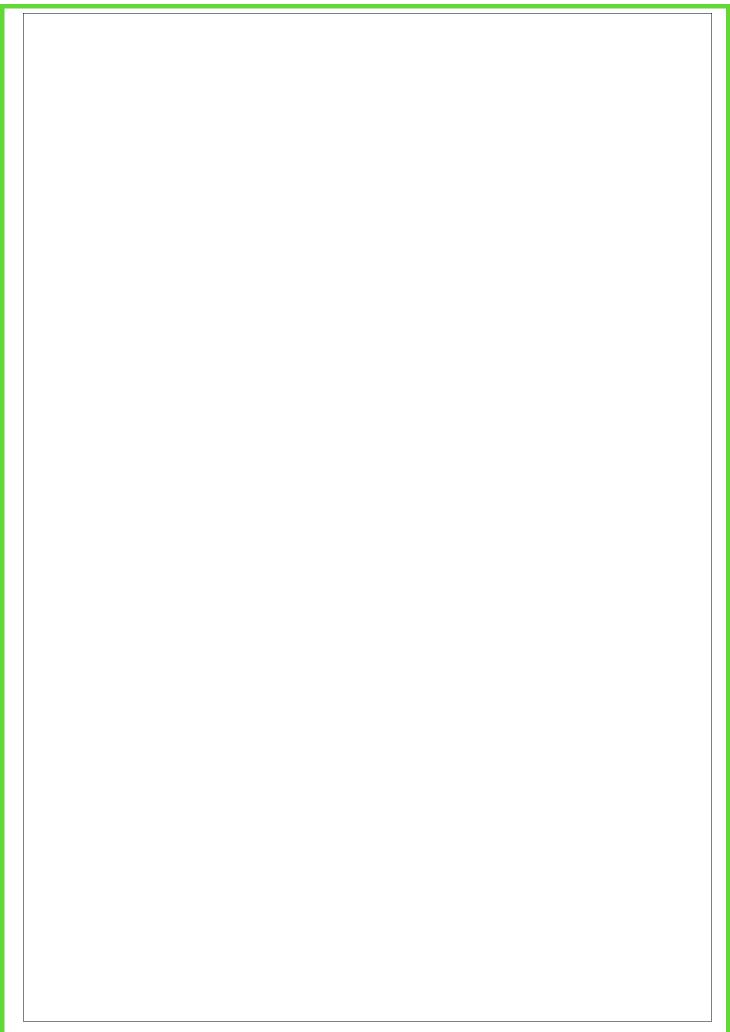
Copies of essential qualifications will be required on appointment. If there are any gaps in your education history please explain the reasons why in the Gaps section above.

## **Training / Continuing Professional Development**

Please list any relevant course or training you have attended in the last five years, starting with the most recent. If applying for a headship, please include details regarding NPQH. Please continue on a separate sheet if necessary.

Title of Course	Organising Body	Awards (if any)	Date of Attendance

Supporting Information				
Please provide supporting information for your application, in particular any experience, skills, knowledge, training and qualifications relevant to the post applied for as detailed in the Job Description and Person Specification. Please continue on a separate sheet if necessary but must be no more than 2 sides of A4 in not less than 11 font (Teaching roles).				



## References

One reference should relate, if applicable, to an appropriate senior professional in your present job, or most recent employer, or a member of the School/University Academic Staff. If you currently work in a school then it is our policy to seek a reference from the Headteacher. Please state in what capacity the two referees are acting, e.g. current employer.

If you have recently left full-time education, please ensure you include a Head Teacher/College/University Principal as one of your references.

one of your references.			
1st Referee			
Name and Address:			
Telephone Number:		Capacity Known:	
Email Address:			
2nd Referee			
Name and Address:			
Telephone Number:		Capacity Known:	
Email Address:			
Teaching roles: Please note reserves the right to request fur Support Staff roles only: Do  Yes No  The organisation reserves the process.	urther references if required to you consent to your referees	satisfy the pre-employment of being contacted if you are sh	checking process. ortlisted for interview:
Right to Work			
Immigration, Asylum and Nation All shortlisted applicants will be reference to the accompanying Yes No	pe required to provide origina		
Disclosure & Barring Rec	ruitment Checks		
This post involves working in a Service (DBS) clearance.	school and appointment will	therefore be subject to a satis	sfactory Disclosure & Barring
Health Requirements			
Appointment is subject to a sa	tisfactory medical report from	our Medical Adviser.	

The offer of employment is conditional and subject to checks detailed above and further additional pre-employment checks which include, but may not be limited to, verification of identity, proof of qualifications and registrations and an online check.				
omplete a Self Disclosure of Criminal Convictions red to submit a fully completed and signed form				
ernor of the School/Greywood MST?				
of employment for successful candidates. Under the is will be kept confidential and will only be used for the ant organisations to check factual information you have ored manually and/or electronically and if unsuccessful,				
hat I have not canvassed a member/officer of the inection with this application and further, that I will not candidate. I further understand that failure to disclose or Greywood MST or providing information which is disqualify me and that if such failure/untrue information thout notice. I agree that the information I give you in ored and processed for the purpose of personnel				
Date:				