

Teaching Application Form

Name of School: **Coppice Primary School**

Candidate ref.
(office use only)

Post:

Age groups for which trained:

Month/Year QTS Awarded or Expected

1. Specialist Subjects Offered

Main:

Other:

Teacher Reference Number:

DBS Certificate Number:

National Insurance No:

Do you require permission to work in the UK?

Please X the box if you are an early careers teacher (ECT) or if you are completing your training
(An **ECT** is required to serve a statutory induction period)

Applicants may use a continuation sheet for sections where additional space is required

2. Personal Details

Title:	Last Name:	First Name(s):
Please include former names if applicable in brackets		
Permanent Address		Temporary Address (if applicable)
Post Code:	Post Code:	
Contact Details:		
Telephone:		
Mobile:		
Email:		

3. Education, Training and Qualifications

Secondary Education

Name, location and type of schools	Dates (mm/yyyy)	Secondary Examinations passed List all subjects with grades
	From To	
	From To	

Higher Education

University/College/Organisation/Course	Dates (mm/yyyy)	Qualifications passed List all subjects with grades
	From To	
	From To	

Initial Teacher Training (ECTs please include ITT courses undertaken)

College/Organisation/Course	Dates (mm/yyyy)	Qualifications (to be)/passed
	From To	
	From To	

4. Present Post

Name of School		School Address			Phase
Salary £	Special Allowance	Point on Scale	Ages Taught	Date of Appointment	When could you commence duty?

Details of present post held including title, subjects taught and areas of responsibility.	
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5. Previous Teaching Experience

Please give details of all full and part-time paid teaching experience in schools including periods before date of qualification. ECTs please include college teaching practices if applying for your first appointment (use a continuation sheet if necessary).

Local Education Authority, Gov. Body or Country	School	Full Time or % Part time	Post Held	Ages Taught	Periods of paid teaching service. Students give teaching practice dates. (mm/yyyy)
					From To
					From To
					From To
					From To
					From To

Please account for any gaps in your employment history

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6. Previous Industrial, Commercial or Local Government Experience

Please give details of experience (e.g. industrial, clerical, social and other gainful employment after the age of 18 years).

Name and Address of Employer(s)	Date (mm/yyyy)		Nature of Employment and position held (including an indication of whether full or part time)
	From	To	

7. Declarations

Are you related to a councillor, officer, headteacher or school governor of the London Borough of Redbridge?

If yes, please state their name and the relationship

Note: *Canvassing or failure to disclose a relationship to a councillor, officer, headteacher or school governor of the London Borough of Redbridge could disqualify the candidate.*

Rehabilitation of Offenders Act

Before completing this part of the form, please read the following notes carefully.

All posts involving direct contact with vulnerable children are exempt from the Rehabilitation of Offenders Act 1974.

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.

Please take a look at the filtering rules using the following link:

[Filtering rules for criminal record check certificates](#)

The list of offences that will never be filtered are available through the following link:

[Never filtered from a criminal records check](#)

If you have ever been convicted of a criminal offence, which is not 'protected,' you may 'disclose' this separately.

Please ensure that you provide this information as a separate document, which should include your name and the post for which you have applied. The document should be marked 'CONFIDENTIAL - Last Name'.

All information given will be treated in the strictest confidence and will be used for this job application only.

I declare that I have read Section 7 Rehabilitation of Offenders Act as detailed above

I certify that, to the best of my knowledge, the information on this form is true and accurate. I understand that if the information I have supplied is false or misleading in any way, it will automatically disqualify me from appointment or may after appointment lead to disciplinary action, which could lead to my dismissal without notice.

Name:

Date:

Keeping children safe in education – online recruitment checks

In accordance with Safer Recruitment Guidelines and Data Protection Guidelines, we reserve the right to use social media as part of our recruitment processes.

Further details available from the [LGA guidance note](#).

If you would like to discuss this further, please contact the recruiting School.

11. Letter of Application or Supporting Statement

Please include more detailed particulars of your experience, skills and further information in support of your application.

You are advised to limit your Statement to the equivalent of 2 sheets of printed A4.

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12. Please detail any conditions or prohibitions placed upon you by the DfE or other disciplinary bodies

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13. References

Safer recruitment guidelines recommend that references are taken up prior to interview.

Please give the names of two professional referees. One of these should be your present or most recent employer. **References will be requested by email.**

ECTs should provide their initial teacher trainer and a successful teaching practice school.

Referee 1

Title (Mr/Ms/Mrs/ Miss/Dr etc)	
Full Name	
Status	Other
School/College	
Address	
Post Code	
Professional Email:	
Telephone:	

Referee 2

Title (Mr/Ms/Mrs/ Miss/Dr etc)	
Full Name	
Status	Other
School/College	
Address	
Post Code	
Professional Email:	
Telephone:	

You are asked to give details of any disability you may have for which a reasonable adjustment may be necessary. While this information will not be used for short-listing purposes, it will greatly assist in making any interview arrangements etc.

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Successful applicants must produce original certificates of qualifications upon request.

Declaration

You cannot sign this form on screen. By submitting an e-mail application, you undertake that the information you have provided is true and accurate to the best of your knowledge. You may be required to sign your application at a later stage of the selection process.

I certify that, to the best of my knowledge, the information on this form is true and accurate. I understand that if the information I have supplied is false or misleading in any way, it will automatically disqualify me from appointment or may after appointment lead to disciplinary action, which could lead to my dismissal without notice.

Name		Date	
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Coppice Primary School Manford Way Chigwell Essex IG7 4AL	This application form should be returned to the Coppice Primary School by email. Please save this document using your LAST NAME and email to: recruitment@coppice.redbridge.sch.uk
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Thank you for your application

Your email will be acknowledged

Protection of your Data/Information

The information you supply on this application form is subject to the current Data Protection Regulations and specifically the General Data Protection Regulation (GDPR) 2018.

Privacy Notice: Redbridge Schools use this standard application form for the recruitment and employment of teaching staff in schools. The information will be confidentially shared with administrative and management personnel involved directly in the recruitment process within individual schools and with associated Human Resource and Payroll services outside of the school in the context of your employment application. Anonymous data may be extracted for the purpose of statistical recording.

Please note that we will be sharing your application with people contracted to LBR to carry out initial interviews.

Once the recruitment process has been completed the application form and associated documents for successful candidates will be retained to form the basis of an employment record and stored safely and securely. Unsuccessful candidates' details will be securely disposed of in accordance with the guidelines and erased or destroyed - unless there is specific permission for the information to be retained for future recruitment purposes.

You may update the information should you become aware of any inaccuracies in your submitted application by contacting the email address used to submit the application originally. You can also withdraw your application through the same contact.

For further general information please contact: Information Commissioners Office - The UK's independent authority set up to uphold information rights in the public interest, promoting openness by public bodies and data privacy for individuals - ico.org.uk

Recruitment Monitoring

Applicant Ref No

In line with the Codes of Practice of the Equality and Human Rights Commission (formerly Equal Opportunities Commission and the Commission for Racial Equality) and as required by the Audit Commission, Redbridge Council collects and maintains information on gender, ethnic origin and disabilities of its employees. As of April 2009 Redbridge Council will also collect and maintain information on sexual orientation, age and religion or belief of its employees. The information you have supplied will be kept confidential within Human Resources. Departments will only see statistical information and it will only be used to provide an overall profile analysis of Redbridge Council.

Please complete this section of the application form, which will be separated from the rest of the form before shortlist selection takes place.

You can be assured that this information will be treated in confidence and will not be available to short listing officers or interviewers or to future potential managers.

1. Where did you see this post advertised?

2. What is your Date of Birth?

3. What is your Ethnic group?

Please choose one selection from A to E and then tick the appropriate box within your chosen section to indicate your cultural background. If you are ticking one of the 'Any other' boxes please state in the space provided

A. White

British

Irish

Any Other White Background

Please State

B. Mixed

White and Black Caribbean

White and Black African

White and Black Asian

Any other Mixed Background

Please State

C. Asian or Asian British

Indian

Pakistani

Bangladeshi

Any other Asian Background

Please State

D. Black or Black British

Caribbean

African

Any other Black British

Please State

E. Chinese or other Ethnic Group

Chinese

Any other Background

Please State

4. Gender

Female Male prefer not to say

5. Do you have a disability?

The Equalities Act 2010 (EA) protects people with disabilities. The EA defines a person as disabled if they have a physical or mental impairment, which is substantial and long term (i.e. has lasted or is expected to last at least 12 months) and has an adverse effect on the person's ability to carry out normal day-to-day activities.

5a. Do you consider yourself to have a disability according to the terms given in the EA?

Yes No

The Council wishes to ensure that people with disabilities are able to access job opportunities as well as people without disabilities do.

If we know you have a disability we will make adjustments to the working arrangements and/or the working environment provided it is reasonable in the circumstances to do so. We will also make appropriate arrangements for your interview.

5b. If you have answered yes to having a disability, please let us know how we can support you at the interview stage

5c. Please tick if any of the following types of disability apply to you. People may experience more than one type of disability, in which case tick all the types that apply. If your disability does not fit any of these types, please mark 'Other' and state your disability

- Long-standing illness, such as cancer, HIV, diabetes, disease or epilepsy
- Sensory impairment, such as being blind, having a serious visual impairment or being deaf, having a serious hearing impairment
- Physical impairment, such as difficulty using your arms or mobility issues, which means using a wheelchair or crutches
- Learning disability, (such as Down's Syndrome or Dyslexia) or cognitive impairment (such as autism or head-injury)
- Mental health condition, such as depression

Other (please state)

6. What is your religion or belief?

- | | | | |
|--|------------------------------------|---------------------------------|---|
| <input type="checkbox"/> Agnostic | <input type="checkbox"/> Buddhist | <input type="checkbox"/> Jain | <input type="checkbox"/> Sikh |
| <input type="checkbox"/> Atheist | <input type="checkbox"/> Christian | <input type="checkbox"/> Jewish | <input type="checkbox"/> No Religion |
| <input type="checkbox"/> Bahá'í | <input type="checkbox"/> Hindu | <input type="checkbox"/> Muslim | <input type="checkbox"/> Any other religion or belief |
| <input type="checkbox"/> Prefer not to say | | | Please state |

7. What is your sexual orientation?

- Bisexual
- Gay Man
- Woman/Lesbian
- Heterosexual
- Prefer not to say