

Application Form

For Teaching Appointments Only

### School:

Post:

**Personal Details** (BLOCK CAPITALS)

Surname: Title (eg. Mr, Mrs, Miss, Ms):

First name/s:

Previous surname if relevant:

Address:

Town or City: Post Code:

Telephone No. (home): e-mail (home):

Telephone No. (work): e-mail (work):

Telephone No. (mobile):

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| National Insurance No. |  |  |  |  |  |  |  |  |  | Date of Birth |  |  |  |

Do you require a work permit to work in the UK? YES NO

If yes and applicable, when does your permit expire? (month, year): Are you recognized by the DfE as a qualified teacher in the UK? YES NO

If yes, please give date of recognition (month, year): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Teacher Reference Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you successfully completed a period of probation/statutory induction as a qualified teacher in this

country as required by the DfE? YES NO

If yes, please give date of completion (month, year):

Teaching experience (years):

**Teacher Training** *– please give details*

Name of Teacher Training Institution:

From (month, year): To (month, year) :

Age range you are trained to teach:

Qualification obtained:

Subject you are trained to teach: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Additional subjects - : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any additional languages spoken :

**Other Education, Qualifications and Training (excluding initial teacher training)**

|  |  |  |  |
| --- | --- | --- | --- |
| Title and subjects | Certificate/Qualification Grade/Class *(Please specify)* | School, College or University  *(give address)* | Reason for leaving  *(if applicable)* |
|  |  |  |  |

**Current or most recent post (including initial teacher training placement)**

1. Full name and address of school/college, or employer:
2. Type of School: (c) Number of:
3. Local Education Authority:
4. Position held: (f) Scale/grade/MPS:
5. Appointment held – Full-time/Part-time:
6. Dates from/to:
   1. Present salary (give details of special allowances):

## Previous Teaching/Employment Experience - *Please start with most recent and list all employment since leaving education and include any gaps in employment - continue on a separate sheet if necessary*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of Employer | Type of School/ Nature of Business | From | To | Post held | Salary/Scale on leaving |
|  |  |  |  |  |  |

**Your Supporting Statement**

As part of your application you are requested to set out on a separate sheet(s) relevant information in support of your application. Please clearly mark your separate sheet(s) to avoid confusion). Use this section to set out your reasons for applying for this post and show how your qualifications, experience, skills and qualities support your application.

**Disclosure of Relationship**

Are you related to a member of School staff, a School Senior Leader, NEST Staff Central team, a member of

NEST Leadership team, a Member of a Local Committee, a Trustee of NEST?

YES NO

# If Yes, please state his/her name and role within the organisation and department.

# 

# Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Role:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# School / Department:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# 

# *WARNING – Failure to disclose a relationship to an employee of NEST or a member of governance locally or centrally in NEST may lead to the termination of employment*

**References**

Please give the names of two people from whom confidential references may be obtained. They should have knowledge of your professional capacity and one must be your most recent employer. Your referees will be contacted if you are called for interview.

Referee

Referee

Position

Position

Employer/School name

Employer/School name

Address

Address

Post Code

Post Code

Tel No

Tel No

e-mail

e-mail

Professional relationship

Professional relationship

Period known (years)

Period known (years)

**Additional Information**

#### Superannuation

Do you contribute to the Teachers ‘Pension Scheme?: YES NO

Or other Superannuation (give name):

If part-time, have you made a positive election to join the Teachers ‘Pension Scheme’: YES NO

Are you applying for the post on a job share basis YES NO

If YES and you have a job share partner give her/his name (separate application required)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you have: | a) a full current driving licence? YES NO |  |  | NO |
|  | b) a car you can use for work? YES NO |  |  | NO |

**Unsuccessful applications**

If you are unsuccessful for this post would you be willing for your application form to be considered for other similar vacancies in Nexus Education Schools Trust? YES NO

#### Disability

Do you consider yourself to have a disability? YES NO

If yes: (i) If you are aware of any equipment or adaptations that will assist you, please give details:

(ii) Will you require any assistance if called for interview? If yes, please give details.

**Protection of Children**

We are committed to safeguarding and promoting the welfare of children and young people. We expect all staff to share this commitment and to undergo appropriate checks, including an enhanced DBS check. Accordingly, this post is exempt from the Rehabilitation of Offenders Act (1974). The amendments to the Exceptions order 1975 (2013 & 2020) provide that certain spent convictions and cautions are ‘protected’ and are not subject to disclosure to employers and cannot be taken into account. Guidance and criteria on the filtering of these cautions and convictions can be found on the Ministry of Justice website. Offers of employment will also be dependent on completion of a satisfactory police check. Disclosure of a criminal background will not necessarily bar you from any appointment.

Have you ever been convicted of a criminal offence? YES NO

If yes, please give details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Offence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sentence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please give details of your police check with the Disclosure and Barring Service (DBS)

Police check date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DBS number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Renewal Date \_\_\_\_\_\_\_\_\_\_\_

**Data Protection**

Under the terms of the UK General Data Protection Regulations (GDPR) May 2018, the information you provide on this form will only be used by Nexus Education Schools Trust (NEST) for the purpose of assessing your suitability for employment, for monitoring policies and procedures, and for personal management purposes.

Nexus Education Schools Trust (NEST) is committed to protecting your privacy when you apply for a position with us. It is important to us that you can trust us to keep your information safe and to use it in ways that you will think are reasonable and ethical. NEST are the data controller for the information we hold about you, this means we control how your personal information is processed and for what purposes. For further information please refer to our Data Protection Policy <http://nestschools.org/nest-policies/>

For any position that you apply for, if unsuccessful, this information may be retained on file for 6 months. The information may be used in internal proceedings to consider a complaint about the selection process and/or to defend against a legal challenge to the fairness of the selection process from any interested party. The information you provide to us on this form may also be used in the prevention and detection of crime and fraud, or shared with other bodies administering public funds solely for this purpose.

**To be signed by all applicants**

* I confirm that, to the best of my knowledge, the information on this form is true and correct.
* I am in possession of the certificates which I claim to hold, and understand that willful falsification may result in dismissal if I am appointed.
* I understand that any offer of employment will be subject to satisfactory medical and police checks.
* I declare that the information I have provided is true and accurate and in particular that I have not omitted any material facts which may have a bearing on my application. I understand that any contract of employment with Nexus Education Schools Trust (NEST) is offered on the basis of the information I have provided. I understand that a false declaration, which results in my appointment to a school within NEST, may render me liable to dismissal. I give explicit consent that the information which I give on this form may be processed in accordance with the UK General Data Protection Regulations (GDPR) May 2018. The information you provide to us on this form may also be used in the prevention of crime and fraud or shared with other bodies administering public funds solely for this purpose.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Recruitment Monitoring – *To Be Removed for Sifting Purposes***

**Nexus Education Schools Trust is committed to Equal Opportunities**. The aim of its policy is to ensure that no job applicant or employee if treated unfairly on the grounds of age, colour, national origins, nationality, race, disability, family commitments, gender, marital status, membership or otherwise of a trade union, religion or sexual orientation.

Without accurate data on the composition of our workforce and on job applicants, we are unable to monitor the effectiveness of our policies and procedures. Therefore, we ask for your co-operation in completing the monitoring section of this form. This information will be used for statistical purposes only and will not be reproduced in a way that enables individuals to be identified. All information supplied by job applicants is treated in the strictest confidence.

**Job Title** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Job Reference** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Personal Details** (BLOCK CAPITALS)

**Surname** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **First name(s)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Gender Age** – what age are you?

Male 🞏 Female 🞏

**Ethnic Group** – Please tick one box (or write in one box if appropriate)

|  |  |
| --- | --- |
| **Asian or Asian British** | **Black or Black British** |
| □ Bangladeshi  □ Indian  □ Pakistani  □ Asian other (please write in)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | □ African  □ Caribbean  □ Black other (please write in)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Mixed** | **White** |
| □ White and Asian  □ White and Black African  □ White and Black Caribbean  □ Mixed other (please write in)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | □ British  □ European  □ Irish  □ Romany/Traveller  □ White other (please write in)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Chinese or other ethnic group** | **I decline to self classify** |
| □ Chinese  □ Mixed other (please write in)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | □ (please tick) |

**Disability**

To help you decide whether you have a disability as defined under the Disability Discrimination Act 1995 please read the following:

A disability is defined as ‘a physical or mental impairment, which has a substantial and long-term adverse effect on a person’s ability to carry our normal day-to-day activities’.

The effect an impairment may have on day-to-day activities is defined in the Act as falling within the following categories:

1. Mobility
2. Manual dexterity
3. Physical co-ordination
4. Continence
5. Ability to lift, carry or otherwise move everyday objects
6. Speech, hearing or eyesight
7. Memory or ability of concentrate, learn or understand
8. Perception of the risk of physical danger

The impairment has to be substantial, that is something more than trivial and it needs to be long-term, ie. has lasted or is likely to last in total for at least twelve months or is likely to last for the rest of the life of the person affected. Having considered the above information, please tick one of the following:

□ **I do** consider myself to have a disability

□ **I do not** consider myself to have a disability

□ **I decline to** self-classify as to whether I consider I have a disability

**Media Monitoring** – please indicate how you became aware of the post by ticking the appropriate box.

□ Agency

□ Local Newspaper (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ National Newspaper (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Professional Journal (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Local Authority □ Other website (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Internal Vacancy list □ Friend/Relative □ Employment Services

□ Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_