



CONFIDENTIAL

WREN ACADEMIES TRUST (Enfield)

STUDENT SERVICES STAFF APPLICATION

(ALL SECTIONS MUST BE COMPLETED ELECTRONICALLY)

APPLICATION FORM FOR THE POST OF: _____

Are you applying for: Full Time ☐
Part time or Job Share ☐

Please state hours you are available:

1. APPLICANT'S PERSONAL DETAILS

TITLE: (Mr, Mrs, Ms, etc)	ADDRESS FOR ALL CORRESPONDENCE:
SURNAME: (in capital letters)	
PREVIOUS SURNAME(S): (if any)	DATE OF BIRTH:
FIRST NAME: (in capital letters)	HOME TELEPHONE NUMBER:
WORK TELEPHONE NUMBER:	MOBILE NUMBER:
E-MAIL ADDRESS:	NATIONAL INSURANCE NUMBER:

2. CURRENT EMPLOYMENT

PRESENT POST:	DATE APPOINTED:
NAME OF EMPLOYER:	LOCAL EDUCATION AUTHORITY (if applicable):
ADDRESS:	RESPONSIBILITIES:

3. CURRENT SALARY

SALARY: (BASIC) (Please give spine point if applicable)

ADDITIONS: (Total of any allowances, bonus etc)

4. OTHER EMPLOYMENT (PLEASE START WITH EARLIEST APPOINTMENT)

EMPLOYER:

FROM

TO

POST HELD AND RESPONSIBILITIES:

5. PLEASE ACCOUNT FOR ANY TIME SINCE LEAVING SCHOOL WHICH IS NOT INCLUDED IN YOUR EMPLOYMENT HISTORY ABOVE

6. EDUCATION AND QUALIFICATIONS

SECONDARY SCHOOL(S) AND ADDRESS	FROM	TO	EXAMINATIONS PASSED WITH GRADES	DATES
COLLEGE OF FURTHER EDUCATION	FROM	TO	EXAMINATIONS PASSED WITH GRADES	DATES
UNIVERSITY OR POLYTECHNIC	FROM	TO	DEGREE/CLASS	PRINCIPAL SUBJECTS
OTHER QUALIFICATIONS			GRADE/CLASS (if applicable)	DATE OF AWARD

7. PROFESSIONAL DEVELOPMENT

TRAINING COURSES ATTENDED DURING THE LAST THREE YEARS

COURSE TITLE (and award if gained)	PROVIDER	DATE

8. OUTSIDE INTERESTS

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9. SUPPORTING STATEMENT

Please provide, on separate sheets, a statement in support of your application. This should be typed in font size 12 and be no more than two sides of A4 in length.

10. CONFIDENTIAL INFORMATION

DO YOU CONSIDER YOURSELF TO BE DISABLED?	YES / NO
IF YOU WISH, PLEASE GIVE FURTHER DETAILS HERE	
ARE THERE ANY SPECIAL ARRANGEMENTS YOU WOULD REQUIRE TO ATTEND AN INTERVIEW?	YES / NO

IF YES, PLEASE GIVE DETAILS	
IF OFFERED THE POSITION, ARE THERE ANY ARRANGEMENTS OR ADJUSTMENTS THAT THE SCHOOL WOULD NEED TO MAKE TO ENABLE YOU TO CARRY OUT THE ROLE?	YES / NO
IF YES, PLEASE GIVE DETAILS	
<p>I understand that under the terms of the Asylum and Immigration Act 1996 should I be short-listed for the post for which I am applying, I will provide for the governing body, as employer, an original document* showing my entitlement to work in this country.</p> <p>*Acceptable documents include your National Insurance card, a birth certificate issued in the UK or Eire, a P45 from your previous employer, a valid passport, or any relevant authorisation allowing you to work in this country.</p>	
ARE YOU RELATED TO ANY MEMBER OF THE WREN ACADEMY GOVERNING BODY OR SENIOR EMPLOYEE OF OUR SPONSORS – THE LONDON DIOCESAN BOARD FOR SCHOOLS OR BERKHAMSTED SCHOOL?	YES / NO
IF YES, PLEASE GIVE DETAILS:	
<p>Depending on the outcome of your application on this occasion, we may wish to contact you about future opportunities at the Academy.</p> <p>Please tick this box if you do not wish to be contacted in this way <input type="checkbox"/></p> <p>Please state where (or how) you first learned of this vacancy:</p> <p>Our normal practice is to take up references prior to interview.</p>	
<p>To the best of my knowledge the information on this form is correct. I am in possession of certificates, which I claim to hold. I understand that wilful falsification or omissions may, if I am appointed, result in my dismissal.</p> <p>You are reminded that any canvassing direct or indirect will disqualify candidates.</p> <p>Successful candidates may be required to produce their birth certificate and original proof of qualifications and undergo medical examination.</p> <p>Wren Academy is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.</p> <p>SIGNATURE: _____ DATE: _____</p>	



EQUAL OPPORTUNITIES MONITORING

The Academy is keen to ensure that all applications for posts are considered on an equal basis. Without monitoring an organisation will never know whether its equal opportunities policy is working. To help us achieve this we ask all candidates to complete this equal opportunities monitoring form. **This is confidential and the form will be removed from the application prior to shortlisting. It will not be used in any way as part of the selection process.**

Please tick the appropriate boxes.

Gender ☐ Male ☐ Female

Age ☐ 20 – 29 ☐ 30 – 39 ☐ 40 – 49
☐ 50 – 59 ☐ 60 – 65

Ethnic group

Choose one section from A - E and then tick the appropriate box to indicate your cultural background:

A.	White	C.	Asian, Asian British, Asian English, Asian Scottish or Asian Welsh
<input type="checkbox"/>	British	<input type="checkbox"/>	Indian
<input type="checkbox"/>	English	<input type="checkbox"/>	Pakistani
<input type="checkbox"/>	Scottish	<input type="checkbox"/>	Bangladeshi
<input type="checkbox"/>	Welsh	<input type="checkbox"/>	Any other Asian background, please write in:
<input type="checkbox"/>	Irish		
<input type="checkbox"/>	Any other White background, please write in:	D.	Black, Black British, Black English, Black Scottish or Black Welsh
		<input type="checkbox"/>	Caribbean
B.	Mixed	<input type="checkbox"/>	African
<input type="checkbox"/>	White and Black Caribbean	<input type="checkbox"/>	Any other Black background, please write in:
<input type="checkbox"/>	White and Black African		
<input type="checkbox"/>	White and Asian	E.	Chinese, Chinese British, Chinese English, Chinese Scottish, Chinese Welsh or Other Ethnic Group
<input type="checkbox"/>	Any other Mixed background, please write in:	<input type="checkbox"/>	Chinese
		<input type="checkbox"/>	Any other background, please write in: