

CHRISTOPHER WHITEHEAD LANGUAGE COLLEGE & SIXTH FORM

Bromwich Road, Worcester WR2 4AF





APPLICATION FORM - TEACHING

Christopher Whitehead Language College & Sixth Form is committed to safeguarding and promoting the welfare of children and young people and expects all its employees and volunteers to share this commitment.

Please ensure that you complete all sections of this form in black typeface to enable photocopying of the form. Please do not send your Curriculum Vitae (CV) or any Testimonials.

If any sections do not apply to you, enter not applicable (n/a)

Candidate's Name	
School/Establishment	Christopher Whitehead Language College & Sixth Form
Post	Head of Department Food Technology
Any preference for Phase i.e. KS3/4	

Please send your completed application form to: recruitment@cwlc.email

We reserve the right to close this vacancy early if we receive sufficient applications for the role. Therefore, if you are interested, please submit your application as early as possible.

We usually take up references following a verbal acceptance of the position; however we reserve the right to take up references prior to interview stage. If you do not want us to contact your referees prior to interview please make sure you say so on your application form.

Thank you for your interest in working in our school.

1. PERSO	ONAL DETAILS			
Surname/Family Name		Forename(s)		
Former Surname/Family Name				
Preferred Title				
Home Address		Contact Address (if different)		
DfE Teacher Ref No. (TRA)		National Insurance No.		
Telephone No. (Home)		Telephone No. (Work)		
Email Address (Home)		Email Address (Work)		
disability confident				
	Confident' Scheme the school uniled on the person specification.	dertakes to intervie	w disabled people who meet the m	inimum
Do you consider that	you would qualify for an interview	under the Scheme	YES NO	

If you need any particular arrangements to be made for interview e.g. access, sign interpreter, induction loop system,

taping of documents etc., please specify them below:

2. EDUCATION, TRAINING AND QUALIFICATIONS

Please give brief details of all training and other courses you have undertaken whether or not they are relevant to this post.

Name of School/College/University	From - To	(*) Qualifications	Date Obtained
attended	(Month/Year)	including Grades	(Month/Year)
Schools (after age 11)			
Frombon on High on Education			
Further or Higher Education (Full or Part Time)			
(i dii di i di t liille)			
Teaching Qualifications			
reacting Qualifications			
Ago Pango Trained			
Age Range Trained			

Professional Development	
(Relevant courses and other events / activities including	g dates)
Membership of Professional Bodies (excluding Teacher	rs' Professional associations)
* Applicants invited for interview will be required to prod	luce documentary evidence of their qualifications
Applicants invited for interview will be required to prod	ace documentary evidence of their qualifications.
Driving Licence:	
Do you hold a current, valid full driving licence?	
Do you note a current, valid full driving licence:	
Yes L	No L
Please describe e.g. Car/LGV/PCV:	
Have you completed an assessment of competency for	or driving a minibus?
If so, what was the date?	
Do you own a car?	
Yes	No 🗆
Do you have access to one?	
Yes	No 🗆
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Ts) rafter 7 th May 1999, please complete the following section:
Date when completed induction
Literacy Numeracy ICT
TT)
Yes No No
her Pension? Yes No
rom and the type of pension you are receiving i.e. Age, phased, premature or ill health
Literacy Numeracy ICT

3. EMPLOYMENT/WORK EXPERIENCE

Please include any previous work experience, either paid, unpaid or voluntary starting with the most recent. Please complete the following, in full chronological order, starting with your current employment and include all employment including non-teaching. For safeguarding purposes, it is important that all gaps in your employment history are fully accounted for. Please also include any breaks in employment history together with the reason for the break.

Current/most recent School or other employer (with address)								
Position Held			P	Full or art Time				
Present salary and point on pay spine								
Date Started	cease	e employme d if applical son for leavi	ble					
Employing Authority								
Age Range								
Duties and Responsibilities								
Date Passed Threshold (if applica	ble)							
Previous schools or other employers/employer and Employing Authority	Age Range + Boys/Girls/ Mixed	Approx. No. on Roll	Position held and responsibilities (and full time or part time)	From	То	Reasons for Leaving		

4. SUPPORTING STATEMENT

(Please ensure your statement is a maximum of 2 * A4 pages, font size 11) Please use this space to give information in support of your application for this post, demonstrating how you meet the Person Specification and requirements of the Job Description. You may wish to include details of any interests, experience, responsibilities or education philosophy which you consider relevant.

5. REFERENCES

Please give details of two people who are able and willing to comment on your suitability for this job. If you are or have been employed, one should be your present or most recent employer. If this employment has been within a school, this would normally be your head teacher, unless in exceptional circumstances. If you are not currently working with children, but have previously done so, one referee must be the most recent employer who employed you to work with children. Written references will not be accepted from relatives or friends

To comply with 'Keeping Children Safe in Education' the school will seek and scrutinise references prior to interview. Referees will be contacted to provide further clarification if needed. All references will be compared for consistency against the information disclosed in your application form and you will be asked about any discrepancies at interview Please advise if you do not want us to contact your referees prior to interview and provide reasons and do contact your referees to let them know they may be required to provide a reference.

A.	Name	B.	Name
	Address:		Address
	Telephone No.		Telephone No.
	Email address:		Email address:
	Relationship to you (e.g., Headteacher)		Relationship to you (e.g., Headteacher)

6. DECLARATIONS

Immigration, Asylum	and	Nationality	Act ((2006)	į
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In accordance with the Immigration, Asylum and Nationality Act 2006, Christopher Whitehead Language College & Sixth Form requires new members of staff to provide documentary evidence that they are entitled to undertake the position applied for/have an ongoing entitlement to live and work in the United Kingdom. Therefore, all candidates shortlisted for interview are required to complete a declaration and to produce acceptable specified documentary evidence at interview.
I confirm that I am legally entitled to work in the UK $\ \square$
Safeguarding Vulnerable Groups Act (2006) Christopher Whitehead Language College & Sixth Form is obliged by law to operate a checking procedure for employees who have substantial access to children and young people.
I understand that it is an offence to apply for a role if barred from engaging in regulated activity relevant to children \Box
If you are the successful applicant, you will be required to have an Enhanced Disclosure & Barring Service disclosure & we will also check the DBS barred list (children). Failure to complete this form will result in your application not proceeding any further. The possession of a criminal record will not automatically debar you from consideration for the post for which you have applied. Any information given will be treated as confidential and will only be used in relation to the post for which you have applied.
The school will check with the Disclosure and Barring Service (DBS) to see if you have any criminal convictions.
I agree that the appropriate enquiry may be made to the Disclosure & Barring Service $\ \Box$
Data Protection Act 2018 The information provided by you on this form as an applicant will be stored securely either on paper or electronically in accordance with our obligations under the Data Protection Act 2018 and General Data Protection Regulation. The information provided will be processed solely for the purpose of recruitment and any other activity relating to this recruitment.
I hereby give my consent for the information provided on this form to be held on computer or other relevant filing system and to be shared with other 3rd Party Processors for the purpose of this recruitment in accordance with Data Protection 2018.
Disclosure A candidate for any appointment with Christopher Whitehead Language College & Sixth Form must state below any known relationship to any employee of the school when making an application. A candidate failing to disclose such a relationship or seeking to improperly influence the recruitment and selection process shall be disqualified from appointment, or if appointed, shall be liable to dismissal without notice.
Are you related to any member of the Governing Body or existing employees of the school?

If Yes, give details:	
NOTE THAT THE WITHHOLDING, FALSIF	ON THIS FORM IS CORRECT TO THE BEST OF MY KNOWLEDGE AND I CATION OR OMISSION OF RELEVANT INFORMATION BY A SUCCESSFUL NARY ACTION WHICH MAY LEAD TO DIMISSAL.
Signed:	Date:
BY SUBMITTING THIS FORM ONLINE, I A	GREE THAT THIS IS EQUIVALENT TO ME SIGNING THE DECLARATION.

Equal Opportunities Monitoring Form

Christopher Whitehead Language College & Sixth Form is committed to the elimination of all forms of unjustifiable discrimination.

We seek a workforce which reflects the community we serve. We welcome applications from those groups which are under-represented on our staff. Applicants for jobs are judged on their skills and suitability for the vacancy. To ensure this policy is carried out effectively, we ask all applicants to provide the information requested on this page. It will be used only for administrative and monitoring purposes and will be confidential and not used to discriminate in favour or against any individual applicant.

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process.

Please Note: These categories have been recommended to the employers by the Commission for Racial Equality and are being collected to assist us to monitor the effects of its equal rights policy and to meet the requirements of the Race Relations (Amendment) Act 2000.

White	English	1	
	Scottish	2	
	Welsh	3	
	Irish	4	
	Any other white	5	
Mixed	White & Black Caribbean	6	
	White & Black African	7	
	White & Asian	8	
	Any other mixed	9	
Asian or Asian British	Indian	10	
	Pakistani	11	
	Bangladeshi	12	
	Kashmiri	13	
	Any other Asian	14	
Black or Black British	Caribbean	15	
	African	16	
	Any other black	17	
Other Ethnic Groups	Chinese	18	
·	Any other ethnic group	19	
I am: Female Male		on Binary Other	Prefer not to say
For these purposes, disability is defined as any physical or mental impairment which has a substantial and long terr (over 12 months) adverse effect on your ability to carry out normal day to day activities.			
Please tick the age band current	tly applicable to you:		
up to 19 20-29	30 - 39	☐ 40-49 ☐ 50	-65 Over 65
This information will be treated as completely confidential and will be used for monitoring purposes only. This information will be detached from the application form on receipt and will not be considered during the selection			

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