

# **Application form for Employment**

This document can be made available in other languages, on tape, in Braille, large print and in other formats. For more information please contact the School

Thank you for requesting an application form for a vacancy with this school. We will use this form to help us decide your suitability for the job so please ensure that it is accurate and complete

The information you provide on this form will be used in accordance with the Data Protection Act and your form will be retained for six months from the closing date. The application form of the successful candidate will form part of their employee file and may be used for a number of employment related purposes

Please note	CVs will not be accepted
	All sections of the form must be completed

Job Reference

Late applications will not normally be considered

### **Post**

Post applied for:

Date of Birth

Closing Date.			Location				
Your details							
Surname:			First Name:			Title:	
Previous name/s (if word "none"	f you have any) or inse	ert the					
Address:							
Home phone number				Mobile phone number			
Email Address					•		
National Insurance Number							

Current position					
Current Salary					
How much notice current job?	e will you have to gi	ve when you leave your			
Do you need a wo	ork permit?				
Have you been e	mployed by this sch	ool before?			
Where did you se	ee this job advertise	ed?			
For Teaching pos	ts:				
Do you have Qua	lified Teacher Statu	is?			
Teacher Reference	ce number				
Subjects you tead	ch (secondary)				
Leadership respo	nsibilities (if any)				
F	A I II aka ma				
Employmen		dotaile of vour provious on	nlovmont Dloos	s at a with warm	nrocont or loct
		details of your previous em nool, please give us details o			=
	os outside of teachi		or arry monday job.	s you have had.	Ticuse diso
Continue on ar	nother sheet if nece	essary.			
Dates (month		Employer's Name and	Your	Your salary	Your reason for
and year		Address	position	when you left the job	leaving
From To				left the job	
/	/				
/	/				
/	1				
/	,				

Name of current Employer

/	/		
/	/		
/	/		
	/		
,	/		
/	/		
/	/		

## **Gaps in Employment / Training**

Please set out all gaps in employment or training

Dates (month and year)		Reason for the Gap
From	То	
/	/	
/	/	
/	/	
/	/	

## **Education and qualifications**

Please fill in the table below with details of your education and qualifications. List all periods of study, in date order.

Dates (month and year)		Name and address of Did you school, college or study f					
and year,		university	•	Date	Subject	Grade &	class
From	То		time?				
/	/						
/	/						

	/					
,	,					
/	/					
Duefossion				•		
Name of profe organisation		hnical qualification  Membership (	grade & number	How did	d you becomer? (For exam	Date
Supporting	g Evidenc	:e				
assessing yo	и аррпсас	ion against the criteria	TIOI LITE TOTE.			



### References

#### It is the Schools' practice to take up references for short-listed applicants prior to interview

Please give the name and address of two referees from which the School may seek information regarding your suitability for employment covering at **least the last 3 years** of your employment. If you are currently employed, one of the referees must be your current employer; otherwise it must be your most recent employer. If you are in, or have just completed full-time education, one referee should be from your school / college or university. These should not include a relative and personal referees must be able to comment on your skills and abilities in relation to the post. Please continue on a separate sheet if necessary

### For post that require a DBS check

If you are not currently working with children but have done so in the past, the second referee you supply should be from the most recent employer where you were employed to work with children or vulnerable adults

Please ensure your references below cover the last 3 years of employment.

	rom your present or most recent employer. If this reference will come from a
School, the referee should b	e the Headteacher / Executive Head / Head of School
Name of referee	
Position	
Address	
Email	
Tel number	
How do you know them	
Name of referee	
Position	
Address	
Email	
Tel number	

Reference 2	
Additional Referees (to cov	er 3 years)
Name of referee	
Position	
Address	
Email	
Tel number	
How do you know them	
Name of referee	
Position	
Address	
Email	
Tel number	
How do you know them	
Declarations	
has a substantial and long-to	es a person as having a disability if they have "a physical or mental impairment which erm adverse effect on their ability to carry out normal day to day activities" aged to apply. Disabled applicants who appear to meet the essential criteria of the tranteed an interview.

Please confirm whether you consider yourself to have a disability?

Please indicate with a Yes or No:

How do you know them

If yes, what is the nature of your disability?
Wherever possible and reasonable we will make adjustments and offer alternatives to help a person with a disability through the application and selection process
Please provide details below of any information you would like us to take into account with regard to your disability in order to offer you a fair selection interview
Eligibility to work in the UK

Are you eligible to work in the United Kingdom and are you able to provide proof of this?

(please indicate "yes2 or "no")

If you are currently working in the UK with Visa restrictions please provide the following information:

Visa Number	
Expiry date	

The Immigration, Asylum and Nationality Act 2006 requires all employers in the UK to make basic document checks on every person, before they start work, therefore if you are asked to interview, you will be required to provide evidence (original documents only) that you are eligible to live and work in the UK and copies will be taken at interview and if unsuccessful these will be destroyed in accordance with the General Data Protection Regulations and the Data Protection Act 2018 (DPA). If you are offered the post these original documents will be retained on your personal file

### **Declarations**

Are you in any way related to or have a personal relationship with any Governor, elected member of Torbay Council or an employee of the School or Torbay Council?					
If 'Yes' please give details belo	w:				
Name:					
Relationship:	Job Title:				
• ''	on, which may be deemed to offer an unfair advantage, from any Elected vees of Torbay Council in connection with this appointment will disqualify your				

### Information regarding posts that require a Criminal Record Check

For positions that are included in the Exceptions Order to the Rehabilitation of Offenders Act 1974, and that are required to access the Public Services Network (PSN) or data, or any regulated activity positions as defined by the Criminal Justice and Court Services Act 2000, a Criminal Records Check will be required.

Prior to appointment, all applicants who are shortlisted will be required to complete a Criminal Records Self Disclosure form prior to interview so that certain convictions and cautions can be discussed at the interview stage.

The successful candidate will be offered employment that is subject to a criminal record check before the appointment is confirmed.

The amendments to the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (2013 and 2020) provides that when applying for certain jobs and activities, certain convictions and cautions are considered 'protected'. This means that they do not need to be disclosed to employers, and if they are disclosed, employers cannot take them into account.

Guidance about whether a conviction or caution should be disclosed can be found on the <u>Ministry of Justice</u> website.

### **Disciplinary action**

application

Have you been the subject of formal disciplinary action in your past employment or currently in the process of ongoing disciplinary action in your current position?

Yes No

If 'yes' please give brief details below or on an additional sheet if necessary

### **Criminal record check**

For positions that are included in the Exceptions Order to the Rehabilitation of Offenders Act 1974, and those that are required to access the Public Services Network (PSN) or data or any regulated positions as defined by the Criminal Justice and Court Services Act 2000, all applicants who are offered employment will be subject to a criminal record check (Disclosure) from the Disclosure & Barring Service before the appointment is confirmed. This will include details of ALL cautions, reprimands or final warnings as well as convictions, whether "spent" or "unspent" except where these have been filtered out in line with current guidance. Criminal convictions will only be taken into account when they are relevant to the post.

Please give details below, or if you prefer, on an additional sheet and attach it to this form in a sealed envelope marked "Confidential Disclosure"

### **Data Protection - Fair Processing Notice**

The collection, processing, maintenance and retention of any personal data which the School processes, is governed by legislation such as the GDPR and the Data Protection Act 2018, and by the School's own policies and procedures. The School will use any personal data you provide within this document solely for the purpose of assessing the eligibility of your application when applying for a vacancy. The information given will be provided to School's employees acting as response handlers and recruitment managers. They may share the information with colleagues for the purpose of shortlisting and interviewing for the vacancy. The information may also be shared with external parties if required by law. The information will be kept on file for a period of six months after the closing date of the vacancy to allow for any further processes, such as appeals, that may occur. If you are successful in your application for employment with the School, then the application form will be kept on your personnel file for the duration of your employment

I note that the information provided on this application form may be held, further processed or verified, in accordance with the General Data Protection Regulation.

Signature:
Date:
Submitting this completed application form electronically signifies your acceptance of ALL of the above declaration
Final Declarations
The School is committed to safeguarding and promoting the welfare of children and applicants must be willing to undergo the checks appropriate to the post applied for. By signing this application form you are confirming your agreement/commitment.
I confirm that I have read and understood the enclosures provided with this application form
I confirm that the details I have provided in this application form are correct and that I have not deliberately withheld any relevant information that could affect the School's decision to employ
I understand that the deliberate falsification of information or failure to disclose relevant information may lead to my application being rejected, any offer of employment being withdrawn or actual appointment being terminated
I declare that I have not canvassed any employee, Governor or Councillor either directly or indirectly in connection with this application
I note that the information provided on this application form may be held, further processed or verified in accordance with the Data Protection Act 2018
I give my authority for the Employer to verify my qualifications with the relevant body.
Signature:
Date:
Submitting this completed application form electronically signifies your acceptance of ALL of the above declarations

(For official school use ONLY - section to be completed by designated School representative)

Reference 1	Reference 2
Name/Details of the person contacted	Name/Details of the person contacted
Date the verbal verification took place	Date the verbal verification took place
I have verbally verified this reference	I have verbally verified this reference
Signature:	Signature:
Date:	Date:

Cont/....

### **EQUAL OPPORTUNITIES MONITORING**

St Cuthbert Mayne School is committed to the promotion of equality of opportunity in its employment policies, practices and procedures. To make this meaningful we need to monitor the effectiveness of our policies, by analysing statistical information. The information requested below is used <u>for statistical purposes only.</u> This information is not used to inform decisions about individuals. The data is gathered and used, for instance, to record percentages of different groups (e.g. to benchmark against community profiles) and indicate if particular groups are being treated differently. The monitoring of statistical data will help us to ensure we are effectively promoting and operating equal opportunities and anti-discriminatory practice in our employment policies and procedures. All information is held securely and confidentially.

We ask you to sign this form at the end to show that you understand that we will retain the information and what it will be used for.

**Explanatory notes:** 

#### **Ethnic Origin**

The ethnic origin categories the same as those used in the population census in 2001. They are recommended by the Equality and Human Rights Commission is the basis for reporting statutory performance indicators.

### **Disability**

The definition of disability under the Equalities Act 2010 states that "a person has a disability for the purposes of this Act if they have a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities".

General Information	on				
Surname:		First	Name:	Title:	
Staff Group please indicate which staff group you work with by entering a "yes" in the correct box					
Leadership Group			Teachers		
Teaching Assistants	5		Support Staff		

Gender Classification Please indicate with "yes" in the relevant box				
Male	Male Female Not specified			

Disability	
Do you consider yourself to have a disability?	
Please indicate with "yes" or "no"	

Age			
Please indicate your age	group by stating "yes" in the	relevant box	
16 to 19	30 to 39	50 to 59	65-70
20 to 29	40 to 49	60 to 64	

Caring Responsibilities  Do you have caring responsibilities for any of the Please indicate with "yes" in any boxes that applications are considered by the please indicate with "yes" in any boxes that applications are considered by the please indicate with "yes" in any boxes that applications are considered by the please indicate with "yes" in any boxes that applications are considered by the please indicate with "yes" in any boxes that applications are considered by the please indicate with "yes" in any boxes that applications are considered by the please indicate with "yes" in any boxes that applications are considered by the please indicate with "yes" in any boxes that applications are considered by the please indicate with "yes" in any boxes that applications are considered by the please indicate with "yes" in any boxes that applications are considered by the please indicate with "yes" in any boxes that applications are considered by the please indicate with "yes" in any boxes that applications are considered by the please indicate with "yes" in any boxes that applications are considered by the please indicate with "yes" in any boxes that applications are considered by the please indicate with "yes" in any boxes that applications are considered by the please indicate with "yes" in any boxes that are considered by the please indicate with "yes" in any boxes that are considered by the please indicate with the please of the please indicate with the please of th	_	
Children aged 0-6	Children aged 6-11	
Children aged 12-16	Other dependent or person to whom you have Caring Responsibilities	

Ethnicity How would you best de	escribe your ethnic origin?		
Classification		Code	Please indicate with "yes" in the relevant box
	British (i.e. English/Scottish/Welsh)	WB	
White	Irish	WI	
	Any other White background*	wo	
Mixed	White and Black Caribbean	МС	
	White and Black African	МВ	
	White and Asian	MA	
	Any other Mixed background*	МО	
Asian or Asian British	Indian	I	
	Pakistani	Р	
	Bangladeshi	В	
	Any other Asian background*	AO	

	Caribbean	ВС	
Black or Black British	African	ВА	
	Any other Black background*	во	
Chinese	Chinese	С	
*Other ethnic group	Please state:-	OE	

I confirm the above information is correct. I confirm that I understand how the information provided will be retained and what it will be used for. I understand that the information on this form will be treated in the strictest confidence.

Name	
Signed	
Date	

Thank you for taking the time to complete this form. Please return it to the HR and Personnel Officer at St Cuthbert Mayne School.