



CAMBORNE SCIENCE
& INTERNATIONAL ACADEMY

TEACHING APPOINTMENT

APPLICATION FORM



APPLICATION FOR TEACHING APPOINTMENT

The purpose of this form is to provide CSIA with a standardised set of information for all applicants, please complete all parts of this form adding any further information demonstrating how you believe you meet the requirements of this position.

The information on this form will be kept confidential within CSIA and, if successful, in your personnel file. It will be used by the CSIA recruitment and management team for the purposes of selection and employment, in accordance with the General Data Protection Regulation and the Data Protection Act 2018. Application forms from unsuccessful applicants will be held for six months before being destroyed.

If you would like assistance in completing this form, please contact 01209 712280

PERSONAL DETAILS

POSITION APPLIED FOR

FULL LEGAL NAME

TITLE

PREVIOUS NAME(S)

CURRENT ADDRESS

POSTCODE

HOME TELEPHONE

MOBILE TELEPHONE

EMAIL ADDRESS

SKYPE ADDRESS

You may wish to obtain a login if you don't already have one as we may contact you prior to any formal interview. Please note that due to Covid19 we are currently using this method to interview candidates.

DRIVING LICENCE

YES

NO

NATIONAL INSURANCE
NUMBER

DATE OF BIRTH
(OPTIONAL)

DFES TEACHER NUMBER

DFES DATE OF
RECOGNITION

AGE GROUPS/SUBJECTS THAT YOU ARE QUALIFIED TO TEACH

AGE GROUPS

PRINCIPAL SUBJECTS

OTHER SUBJECTS

FURTHER EDUCATION

NAME OF UNIVERSITY/
COLLEGE

QUALIFICATION GAINED
(e.g. Honours Degree, Masters)

SUBJECT(S)

CLASS

DATE AWARDED

NAME OF UNIVERSITY/
COLLEGE

QUALIFICATION GAINED
(e.g. Honours Degree, Masters)

SUBJECT(S)

CLASS

DATE AWARDED

NAME OF UNIVERSITY/
COLLEGE

QUALIFICATION GAINED
(e.g. Honours Degree, Masters)

SUBJECT(S)

CLASS

DATE AWARDED

SECONDARY EDUCATION

Please complete for all qualifications ensuring grade(s)/result(s) are not left blank.

NAME OF SCHOOL

QUALIFICATION GAINED

(e.g. O/A Level, GCSE, CSE, HND)

SUBJECT(S)

GRADE(S)/RESULT(S)

DATE AWARDED

.....

NAME OF SCHOOL

QUALIFICATION GAINED

(e.g. O/A Level, GCSE, CSE, HND)

SUBJECT(S)

GRADE(S)/RESULT(S)

DATE AWARDED

.....

NAME OF SCHOOL

QUALIFICATION GAINED

(e.g. O/A Level, GCSE, CSE, HND)

SUBJECT(S)

GRADE(S)/RESULT(S)

DATE AWARDED

.....

NAME OF SCHOOL

QUALIFICATION GAINED

(e.g. O/A Level, GCSE, CSE, HND)

SUBJECT(S)

GRADE(S)/RESULT(S)

DATE AWARDED

TRAINING AND PROFESSIONAL QUALIFICATIONS

Please list all training and professional qualifications ensuring grade(s)/result(s) are not left blank

NAME OF PROVIDER

COURSE

GRADE(S)/RESULT(S)

DATE AWARDED

.....

NAME OF PROVIDER

COURSE

GRADE(S)/RESULT(S)

DATE AWARDED

.....

NAME OF PROVIDER

COURSE

GRADE(S)/RESULT(S)

DATE AWARDED

.....

NAME OF PROVIDER

COURSE

GRADE(S)/RESULT(S)

DATE AWARDED

.....

NAME OF PROVIDER

COURSE

GRADE(S)/RESULT(S)

DATE AWARDED

PRESENT EMPLOYMENT

Please complete all details of your present or most recent employment

NAME OF SCHOOL/
EMPLOYER

ADDRESS

POSTCODE

POSITION HELD

DATE EMPLOYED FROM

DATE EMPLOYED TO

REASON FOR LEAVING

.....

SALARY

SALARY – PER ANNUM

SPINE POINT

TLR / R&R

IF CURRENT OR LAST POST
ON STANDARD SCALE

IF CURRENT OR LAST POST
WAS A HEADTEACHER OR
DEPUTY HEADTEACHER

PREVIOUS EMPLOYMENT AND PARTICULARS OF TEACHING EXPERIENCE

Please give details of your full employment history, teaching and non-teaching, including precise dates and any breaks in employment and/or voluntary work, starting with the most recent. Please use a separate continuation sheet if necessary.

DATE FROM
(DD/MM/YYYY)

DATE TO
(DD/MM/YYYY)

ESTABLISHMENT/EMPLOYER

POSITION HELD

SALARY/SCALE

AGE RANGE TAUGHT

NUMBER ON ROLL

FT/PT AND
NUMBER OF HOURS

REASON FOR LEAVING

.....

DATE FROM
(DD/MM/YYYY)

DATE TO
(DD/MM/YYYY)

ESTABLISHMENT/EMPLOYER

POSITION HELD

SALARY/SCALE

AGE RANGE TAUGHT

NUMBER ON ROLL

FT/PT AND
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REASON FOR LEAVING

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DATE FROM
(DD/MM/YYYY)

DATE TO
(DD/MM/YYYY)

ESTABLISHMENT/EMPLOYER

POSITION HELD

SALARY/SCALE

AGE RANGE TAUGHT

NUMBER ON ROLL

FT/PT AND
NUMBER OF HOURS

REASON FOR LEAVING

SAFEGUARDING OF CHILDREN AND YOUNG PEOPLE

Explain how you will support Camborne Science and International Academy's commitment to the protection and safeguarding of children and young people.

AVAILABILITY

DATE AVAILABLE TO
START EMPLOYMENT

DAY

MONTH

(OR NOTICE PERIOD)

ARRANGEMENTS FOR INTERVIEW

Please outline any reasonable adjustments that could be made to assist you during the selection process. For example, if invited for interview would you need any particular arrangements?

ELIGIBILITY TO WORK IN THE UNITED KINGDOM

As part of our pre-employment checks, all applicants will be required to prove their eligibility to work in the UK.

Do you require a work permit to take up employment in the UK?

YES

NO

If YES, do you hold a valid UK work permit?

YES

NO

If YES, when does this expire?

STATEMENT IN SUPPORT OF YOUR APPLICATION

Please state the reasons why you are applying for this position, please provide examples and evidence of your experience and abilities which relate directly to the position being applied for.

Please include here any gaps in your employment.

ADDITIONAL INFORMATION REQUIRED

Have you ever been
dismissed from any
previous employment?

YES

NO

If YES, please indicate which
employment and specify the
reasons for your dismissal.

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If you have any connection to any current members of staff of Camborne Science and International Academy, including Governors, please state their name(s) and the nature of your relationship.

REFERENCES

Please list two referees who can write from experience about your professional competence. One must be your existing Headteacher unless you are seeking your first appointment in which case we would expect to see your professional tutor. Please note, if you have ever worked with children ensure you have provided a referee for that activity wherever possible. If you are not able to provide this reference please explain why.

REFEREE 1

FULL NAME

POSITION HELD

ADDRESS

POSTCODE

TELEPHONE NUMBER

EMAIL ADDRESS

HOW DO YOU KNOW
YOUR REFEREE?

MAY WE CONTACT THEM
PRIOR TO INTERVIEW?

YES

NO

ANY FURTHER
INFORMATION

REFEREE 2

FULL NAME

POSITION HELD

ADDRESS

POSTCODE

TELEPHONE NUMBER

EMAIL ADDRESS

HOW DO YOU KNOW
YOUR REFEREE?

MAY WE CONTACT THEM
PRIOR TO INTERVIEW?

YES

NO

ANY FURTHER
INFORMATION

ADVERTISING

WHERE DID YOU SEE THIS
POSITION ADVERTISED?

DATA PROTECTION

In accordance with the General Data Protection Regulation and the Data Protection Act 2018 all information given on this application form will only be used to determine an applicant's suitability for the role and, for successful candidates, will be retained in their personnel file.

Application forms from unsuccessful candidates will be retained for a period of six months before being destroyed.

SAFEGUARDING

CHILDREN & REHABILITATION OF OFFENDERS ACT 1974

Camborne Science and International Academy is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment. If the job gives opportunity for access to children or vulnerable adults, the Academy has a statutory obligation to check with the Disclosure and Barring Service (DBS) in order that any criminal background including spent convictions, bind-over orders or caution is disclosed to the Governing Body.

Only those who have been checked can be employed by the Academy Trust. In the event of a successful application an Enhanced Disclosure will be sought from the DBS.

The position you are applying for is exempt from the Rehabilitation of Offenders Act 1974, and therefore, you must declare to us all convictions, cautions and bind-overs you have had (including those regarded as 'spent'), please complete the Declaration of Criminal Convictions Form.

Please note that a criminal record will not necessarily be a bar to obtaining this position.

ADDITIONAL FORMS

Please confirm that the additional form has been completed and enclosed with your Application Form

DECLARATION OF CRIMINAL CONVICTIONS FORM ENCLOSED	YES	NO
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COMMENTS, IF ANY

DECLARATION

I certify that the information I have provided in this application form and detailed on the enclosed Declaration of Criminal Convictions Form is correct, and that it may be used for the purposes registered by the Academy under the General Data Protection Regulations May 2018. I accept that providing deliberately false information could result in my dismissal or disqualify me from employment.

All successful applicants will be requested to sign this declaration even if an electronic signature has been used.

SIGNATURE

NAME

DATE

.....

Thank you for taking the time to complete this form.