

Employment Application Form

Before Completing

We are committed to safeguarding children and promoting the welfare of children and young people and expect staff and volunteers to share this commitment. We will ensure that all our recruitment and selection practices reflect this commitment. All candidates will be subject to employment checks and successful candidates will be required to undertake a DBS Enhanced Disclosure Check (with barred list).

It is an offence for an individual who has been disqualified from working with children to knowingly apply for, offer to do, accept, or do any work in a 'regulated position.' This role is a 'regulated position.'

Our approach to child protection and safeguarding is available on our website:
INOVA - Safeguarding (www.inovamat.org)

Please complete all sections of this application form in black ink or type.
Incomplete applications or CVs will not be accepted.

Vacancy Job Title	
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Personal Details		
First Name		
Middle Name(s)		
Last Name		
Previous Name		
Mobile Phone Number		
Home Telephone Number		
Email Address		
Address		
Town / City		
Postcode / Zip Code		
Country		
National Insurance Number		
Teacher Reference Number (if applicable)		
Are you qualified to work in the UK?		
Are you applying for this role as a job sharer?		
Do you have a current and clean driving licence?		
Teacher Reference Number (if applicable)		
Are you qualified to work in the UK?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Are you applying for this role as a job sharer?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Do you have a current and clean driving licence?	YES <input type="checkbox"/>	NO <input type="checkbox"/>



Current / Most Recent Employer

Job Title			
Employer			
Location			
I currently work here	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Date from Month Year		Date to Month Year	
Summary of main duties and responsibilities			
Reason for leaving			

Previous Employment

Job Title			
Employer			
Location			
Date from		Date to	
Month		Month	
Year		Year	
Reason for leaving			

Gaps in Employment

Please note, we may not consider your application if you do not fully and satisfactorily explain any and all gaps.

Do you have any gaps in your employment history?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Date from		Date to		
Reason for Gap				
Date from		Date to		
Reason for Gap				



Education

Higher Education					
University / College	Subject	Qualification (e.g. BA)	Result (e.g. 2:1)	Date From	Date To

Further Education					
School / College	Subject	Qualification (e.g. BTEC)	Grade Obtained	Date From	Date To

Professional Courses Attended			
Subject	Organising Body	Dates	Duration

Supporting Statement

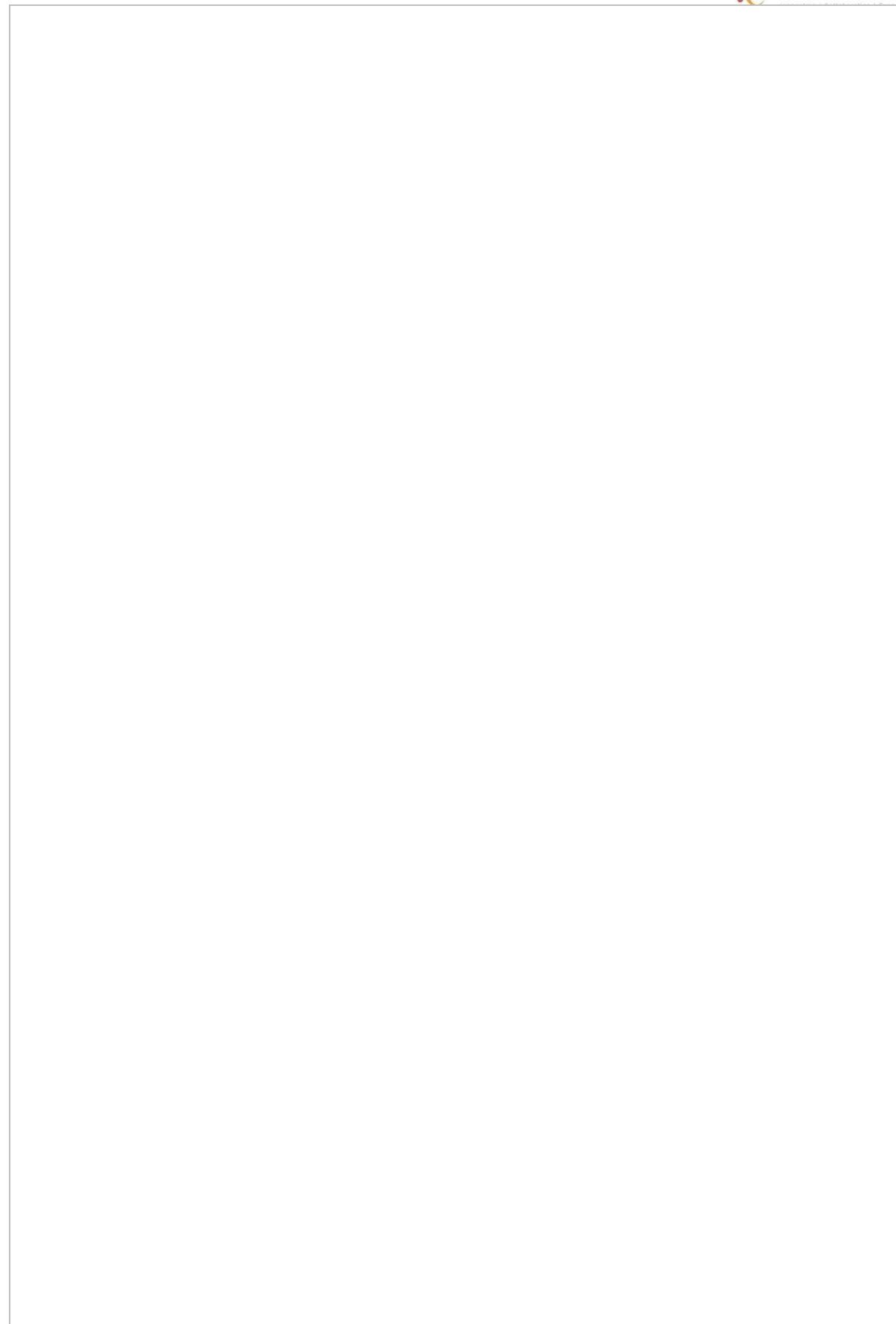
Use this space to explain why you are right for this job. Include any experience, skills or other information which you think makes you suited to this particular role. Your application may not be considered if you don't tailor it to this role.

You should use the criteria set out in the person specification as a guide to completing your supporting statement as part of your job application. We recommend that you use the STAR method:

- Situation – the situation you had to deal with.
- Task – the task you were given to do.
- Action – the action you took.
- Result – what happened as a result of your action and what you learned from the experience.

Examples of how you have met the above criteria should be recent (i.e. within the last two years) and can be from employment, education, training, or volunteering.

Please attach extra sheets if necessary



Referees

In line with the most recent version of Keeping Children Safe in Education, it is normal practice to request references prior to interview. Should you not provide consent for either reference to be contacted prior to interview no offer of employment can be made until we have received at least two satisfactory references.

Referees will be asked about whether you have been the subject of any safeguarding and/or child protection concerns, and if so, the outcome of any enquiry. Referees will also be asked about all disciplinary offences, which may include those where the penalty is 'time expired' if related to children.

Where possible you should include your current or most recent employer as a referee. Referees should be a senior person with the appropriate authority. Personal references, i.e. from relatives or from people writing solely in the capacity as a friend, will not be accepted.

Current or most recent employer	
Title	
Name of Referee	
Position Held	
Organisation	
How do you know the referee?	<input type="checkbox"/> Employer <input type="checkbox"/> Education
Address	
Post Code / Zip Code	
Email Address	
Telephone	

I am happy for you to contact this referee prior to interview. **YES** **NO**

Second Referee

Title		
Name of Referee		
Position Held		
Organisation		
How do you know the referee?	<input type="checkbox"/> Employer	<input type="checkbox"/> Education
Address		
Post Code / Zip Code		
Email Address		
Telephone		

I am happy for you to contact this referee prior to interview. **YES** **NO**

Additional Questions

Are you related to any current INOVA MAT employees, pupils or governors?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If yes, please provide further details.		
Name		
Employee, pupil or governor		
Nature of your relationship		

Declarations

Are there any restrictions on you being resident or being employed in the UK?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If yes, please provide further details:		

Have you lived outside of the UK for more than three months in the past five years?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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If yes, please provide further details. Please specify which countries and the month and year those stays started and ended. We will normally ask for a Police Certificate or Certificate of Good Conduct from the other countries you have lived in.

Country	Date From	Date To

If you are currently registered with the DBS Update Service, please provide your registration number.	
Date your DBS certificate was originally issued.	

I certify to the best of my knowledge and belief that the information given in this application form is true and accurate. I understand that if the information is false or misleading it will disqualify me from my appointment, or after appointment could lead to disciplinary action or dismissal. I also understand that this could lead to a possible referral to the police. I understand and accept that checks may be carried out to verify the contents of this application form.

Signature of Applicant	
Print Name	
Date	

Notes for Applicants

All of our posts are exempt from the Rehabilitation of Offenders Act 1974 (See Link) and the amendments to the Exceptions Order 1975, 2013 and 2020 (See Link).

Shortlisted applicants will be:

- Required to complete and sign a self-declaration of any criminal record on a separate form to be brought in a sealed envelope to interview.
- Make a Childcare Disqualification Declaration for applicable posts.
- Provide evidence of identity/right to work in the UK at interview.
- Provide qualification certificates at interview.
- Provide disclosures concerning child protection investigations, prohibition orders and section 128 directions (where applicable).

We may conduct online searches for shortlisted candidates prior to making our final decision. If any information obtained from the online searches raises concerns around someone's suitability for the role or to working with children, then this may be raised with the candidate at interview and/or we may take advice from local authority children's services.

The information you give will be treated as strictly confidential. Disclosure of a conviction, caution, bind-over order, warning or reprimand will not automatically disqualify you from consideration. Any offence will only be taken into consideration if it is one which would make you unsuitable for the type of work you are applying for.

Data Protection

The information collected in this form will be used in compliance with the Data Protection Regulations. By supplying information, you are giving your consent, if appointed, to the information being processed for all employment purposes. See our Data Protection Policies and Recruitment Privacy Notice: **INOVA** Policies www.inovamat.org/this-is-us/policies

Equal Opportunities

This form will be separated from the application form. Collection of equality information is solely for monitoring purposes to ensure that our policies and procedures are effective. We also collect this data in accordance with the general and specific public sector equality duties under the Equality Act 2010. Any data you enter onto this monitoring form will only be used for monitoring purposes and will not be used in assessing and/or scoring your application or during the interview process. This information is kept fully confidential and access is strictly limited in accordance with the Data Protection Act.

Ethnicity	Workforce Census Code		<input checked="" type="checkbox"/>
Asian or Asian British	AIND	Indian	
	APKN	Pakistani	
	ABAN	Bangladeshi	
	CHNE	Chinese	
	AOTH	Any other Asian background	
Black, Black British, Caribbean or African	BCRB	Caribbean	
	BAFR	African	
	BOTH	Any other Black, Black British, or Caribbean background	
Mixed or multiple ethnic groups	MWBC	White and Black Caribbean	
	MWBA	White and Black African	
	MWAS	White and Asian	
	MOTH	Any other Mixed or multiple ethnic background	
White	WBRI	English, Welsh, Scottish, Northern Irish or British	
	WIRI	Irish	
	WIRT	Gypsy or Irish Traveller	
	WRDM	Roma	
	WOTH	Any other White background	
Other ethnic group	OARA	Arab	
	OOTH	Any other ethnic group	
Prefer not to say	REFU	Refused	

Sexual Orientation	✓	Gender	✓
Heterosexual		Female	
Bisexual		Male	
Homosexual		Transgender	
Pansexual		Non-binary	
Asexual		Prefer not to say	
Other			
Prefer not to say			

Personal Relationship	✓	Faith	✓
Single		No faith	
Living together		Christian (all denominations)	
Married		Buddhist	
Civil partnership		Hindu	
Prefer not to say		Jewish	
		Muslim	
		Sikh	
		Other faith	

Do you consider that you have a disability?	✓
Yes - Please complete the grid below	
No	
Prefer not to say	
My disability relates to:	✓
Physical (e.g. mobility, hand function)	
Communication	
Learning	
Sensory (e.g. hearing, vision)	
Mental health	
Other	
Prefer not to say	

