Closing Date:10.05.2024

*For office use:* Date received by school: Shortlisting outcome

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**Application Form**

|  |
| --- |
| **Post: Learning Coach** |
| **School:** Bournemouth Park Academy, Bournemouth Park Road, Southend-on-Sea, Essex, SS2 5JN |
| **Email**: HR@bournemouthpark.southend.sch.uk | **Telephone Number**: 01702 468046 |

**PERSONAL DETAILS** *(please use block capitals)*

|  |  |
| --- | --- |
| **Last Name** |  |
| **First Name(s)** |  |
| **Title** |  |
| **Previous Names** |  |
| **Address (including postcode)** |  |
| **Date of Birth** |  |
| **National Insurance Number** |  |
| **Home Telephone Number** |  |
| **Work Telephone Number** |  |
| **Mobile Telephone Number** |  |
| **Email Address** |  |
| **Are you eligible to work in the UK? YES/NO****If NO, please specify your circumstances****(All successful applicants will be required to provide evidence of their entitlement to work in the UK)** |

**EDUCATION AND ACADEMIC QUALIFICATIONS**

|  |  |  |  |
| --- | --- | --- | --- |
| **School/College/University** | **From** | **To** | **Subjects and Qualifications** |
| **Secondary** |  |  |  |
| **Higher Education** |  |  |  |
| **Further postgraduate qualifications *(including PGCE)*** |  |  |  |

**PRESENT APPOINTMENT** *(or most recent)*

|  |  |  |  |
| --- | --- | --- | --- |
| **Current post title** |  | **Date****Appointed** |  |
| **Employer’s name and address** |  |
| **Present Salary Details** | **Current Salary:** |  |
| **Grade/Salary range:** |  |
| **Additional allowances** |  |
| **Date Left (if applicable)**  |  | **Reason for Leaving** |  |
| **Brief outline of duties in your current or most recent job** |  |

**PREVIOUS EMPLOYMENT** *(please start with most recent)*

|  |  |  |  |
| --- | --- | --- | --- |
| **Employer** | **Post** | **Period of Service**  | **Reason for Leaving** |
| **From** |  **To** |
|  |  |  |  |  |

**PROFESSIONAL DEVELOPMENT** *(please give details of courses relevant to this application)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Course Title** | **Provider** | **Duration** | **Dates** | **Awards*****(if any)*** |
|  |  |  |  |  |

**OTHER WORK EXPERIENCE** *(please start with most recent)*

|  |  |  |  |
| --- | --- | --- | --- |
| **Nature of Occupation** | **Employer** | **Period of Service** | **Reason for Leaving** |
| **From** | **To** |
|  |  |  |  |  |

**PERIODS WHEN NOT WORKING** *(please give details of any voluntary work and other periods when you have not been employed)*

|  |  |  |
| --- | --- | --- |
| **From** | **To** | **Reason** |
|  |  |  |

**STATEMENT OF APPLICATION**

**In support of your application, you are recommended to include a statement (no more than 2 sides) giving your reasons for applying for this post and how you match the job description and person specification.**

**INTERESTS** *(both professional and leisure)*

|  |
| --- |
|  |

**REFEREES**

|  |
| --- |
| References will only be sought for short listed candidates. It is our policy to obtain references prior to interview; if you have concerns regarding this, please contact us.The first reference must be your present or most recent employer.If any of your references relate to your employment at a school or college your referee **must** be the Headteacher or Principal.  (If you are a serving as Headteacher or Principal, or were previously employed as one, then your referee should be the Chair of the Governing Body/Board or Trustees).If you are currently working with children your present employer will be asked about any disciplinary offences relating to children, current and/or time expired; whether you have been the subject of any child protection concerns and if so, the outcome of these investigations. If you are not currently working with children but have done so previously these issues will be raised with your former employer.If you are not currently working with children but have done so previously, the second reference must be that employer.Please do not give relatives or people solely in the capacity as friends as a referee.Other previous employers may also be approached for information, before interview, to verify details on your application form such as particular experience or qualifications.  |
| **REFEREE 1** | **REFEREE 2** |
| **NAME** | **NAME** |
| **POSITION** | **POSITION** |
| **ADDRESS (including postcode)** | **ADDRESS (including postcode)** |
| **TEL NO** | **TEL NO** |
| **FAX NO** | **FAX NO** |
| **EMAIL ADDRESS** | **EMAIL ADDRESS** |
| In what capacity do you know the referee? | In what capacity do you know the referee? |
| **If you are known to either referee by any other name, please give details.** |

**DECLARATION**

|  |
| --- |
| Are you related to any Member, Trustee, or Local Governor? If Yes, please name the person[s] and state the relationship? YES / NO   |
| Do you have any convictions, cautions, reprimands or final warnings that are not ‘protected’ as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order?YES / NO |
| Have you ever been convicted (or received a caution, warning of final reprimand) for an offence that would not be filtered from the Police National Computer when it is processed by the DBS?YES / NO |
| Have you ever been subject to a child protection (safeguarding) investigation by your employer or any other organisation?YES / NO |
| Are you barred from working with children or adults?YES / NO |
| Are you subject to any prohibition, sanction or restriction that may/will affect your ability to carry out certain activities?YES / NO |
| Have you ever been cautioned or convicted of the relevant offences and orders that lead to disqualification under the Childcare (Disqualification) Regulations 2009? YES / NO |
| To the best of your knowledge, does anyone in the same household as you are currently living, been cautioned or convicted of the relevant offences and orders that lead to disqualification under the Childcare (Disqualification) Regulations 2009? YES / NO |
| The information collected on this form will be used in compliance with the Data Protection Act 1998. By supplying information, you are giving your consent to the information being processed for all employment purposes as defined in the Data Protection Act 1998.  The information may be disclosed, as appropriate, to the governors, to Occupational Health, to the Teachers Pensions Agency, to the Department for Education, to pension, payroll and personnel providers and relevant statutory bodies. You should also note that checks may be made to verify the information provided and may also be used to prevent and/or detect fraud. This form will be kept strictly confidential but may be photocopied and may be transmitted electronically for use by those entitled to see the information as part of the recruitment process.  When the recruitment process is completed, the form will be stored for a maximum of six months then destroyed.  If you are employed as a result of this recruitment process, then this application form will be retained as part of your personnel record. |
| I certify that, to the best of my knowledge and belief, all particulars included in my application are correct. I understand and accept that providing false information will result in my application being rejected or withdrawal of any offer of employment, or summary dismissal if I am in post, and possible referral to the police. I understand and accept that the information I have provided may be used in accordance with paragraph 13 above, and in particular that checks may be carried out to verify the contents of my application form.SIGNATURE OF APPLICANT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| ***Thank you for your application. In the interest of public economy, only short-listed applicants will receive further notification.*** |

Believe ~ Succeed ~ Together

*as part of Eastwood Park Multi-Academy Trust,*

*a charitable company limited by guarantee. Registered in England & Wales No. 07700909*

*Registered office: The Eastwood Academy, Rayleigh Road, Leigh on Sea, Essex SS9 5UU*

Bournemouth Park Academy and EPAT will only collect necessary personal information and store it securely as per guidance of the Academy Data Protection policies. Further information about these can be found by visiting [www.bournemouthparkacademy.co.uk](http://www.bournemouthparkacademy.co.uk) or [www.epat.education](http://www.epat.education)

**EQUALITY AND DIVERSITY MONITORING**

This section will be separated from the rest of your 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.

 **Ethnic Group**

|  |  |  |  |
| --- | --- | --- | --- |
| White | WBRI | British English Welsh Northern Irish Scottish |  |
| WIRI | Irish |  |
| OOTH | Irish Traveller |  |
| OOTH | Gypsy |  |
| WOTH | Other White background |  |
| Mixed | MWBC | White and Black Caribbean |  |
| MWBA | White and Black African |  |
| MWAS | White and Asian |  |
| MOTH | Other Mixed background |  |
| Asian or Asian British | AIND | Indian |  |
| APKN | Pakistani |  |
| ABAN | Bangladeshi |  |
| CHNE | Chinese |  |
| AOTH | Other Asian background |  |
| Black or Black British | BCRB | Caribbean |  |
| BAFR | African |  |
| BOTH | Other Black background |  |
| Other ethnic group | OOTH | Arab |  |
|  | *Write in:*  |  |
| Prefer not to say | REFU |  |  |

|  |  |
| --- | --- |
| No religion |  |
| Christian (including Church of England, Catholic, Protestant and all other Christian denominations) |  |
| Buddhist |  |
| Hindu |  |
| Jewish |  |
| Muslim |  |
| Sikh |  |
| Any other religion  *write in* |  |
|  |  |
| Prefer not to say |  |

|  |  |
| --- | --- |
| Yes *Please complete the grid below* |  |
| No |  |
| Prefer not to say |  |
|  |  |
| My disability is:  |
| Physical Impairment |  |
| Sensory Impairment |  |
| Mental Health Condition |  |
| Learning Disability/ Difficulty |  |
| Long standing illness |  |
| Other |  |
| Prefer not to say |  |

 **Religion Disability**

|  |  |
| --- | --- |
| Female |  |
| Male |  |
| Transgender |  |
| Prefer not to say |  |

|  |  |
| --- | --- |
| Bi-sexual |  |
| Gay |  |
| Lesbian |  |
| Heterosexual |  |
| Other |  |
| Prefer not to say |  |

 **Gender Sexual Orientation**

 **Personal Relationship Age**

|  |  |
| --- | --- |
| Single |  |
| Living together |  |
| Married |  |
| Civil Partnership |  |
| Prefer not to say |  |

|  |  |
| --- | --- |
| 15-24 |  |
| 25-34 |  |
| 35 -44 |  |
| 45-54 |  |
| 55 and over |  |