****

Loxford School Trust

Support Staff Application Form

Please ensure all sections of this form are completed

|  |  |  |  |
| --- | --- | --- | --- |
| **Post Applied For:** |  | **Reference:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Personal Details** Please ensure to include all of your legal first names and your full legal last name | | | | |
| Title: |  | First Names(s): | Surname: |  |
| Previous names (including maiden name): | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| House/ Flat No. |  | Street/ Road Name: |  |
| Town/ City: |  | County: |  |
| Postcode |  | Home Phone No. |  |
| Work Phone No. |  | Mobile Phone No. |  |
| Email Address |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Working in the U.K** | | | |
| Do you require a work permit to work in the U.K? |  | National Insurance No. |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Education and Qualifications** | | | |
| Name of Secondary School/ College/ University/ Other: | |  | |
| Attended From: |  | Attended To: |  |
| Qualifications and grades attained | | | |
| **Qualification:** | | **Grade:** | |
|  | |  | |
|  | |  | |
|  | |  | |
|  | |  | |
|  | |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Secondary School/ College/ University/ Other: | |  | |
| Attended From: |  | Attended To: |  |
| Qualifications and grades attained | | | |
| **Qualification:** | | **Grade:** | |
|  | |  | |
|  | |  | |
|  | |  | |
|  | |  | |
|  | |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Secondary School/ College/ University/ Other: | |  | |
| Attended From: |  | Attended To: |  |
| Qualifications and grades attained | | | |
| **Qualification:** | | **Grade:** | |
|  | |  | |
|  | |  | |
|  | |  | |
|  | |  | |
|  | |  | |

|  |  |  |
| --- | --- | --- |
| **Membership of Professional Bodies** | | |
| Please provide of any Professional Bodies that you are a member of, your membership status (whether by examination, etc) and relevant dates of membership/ validity. | | |
| Professional Body | Membership Status | Relevant Dates/ Validity |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |
| --- | --- |
| **Training Courses Attended**  Please list any relevant informal and job related training you have undertaken with dates (most recent first) | |
| **Training Course:** | **Training Dates:** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Employment History**  Please put your most recent employment first and provide full details of all paid and unpaid employment since leaving full – time education. Please explain any gaps in employment (subject to the provisions relating to disclosures under the Rehabilitation of Offenders Act 1974 and 1986). | | | | | | | | | |
| Name of Current/ Last Employer: | | |  | | | | | | |
| Address |  | | | | | | | | |
| Post code |  | | | Employer’s Contact No. | | |  | | |
| Position |  | | | | | Salary: | |  | |
| Date From: | |  | | | Leaving Date or Required Notice Period: | | | |  |
| Brief description of responsibilities: | | | | |  | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Previous Employer: | |  | | Salary: |  | | |
| Address: |  | | | Postcode |  | | |
| Position |  | | Date From: | | | Date To: |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Previous Employer: | |  | | Salary: |  | | |
| Address: |  | | | Postcode |  | | |
| Position |  | | Date From: | | | Date To: |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Previous Employer: | |  | | Salary: |  | | |
| Address: |  | | | Postcode |  | | |
| Position |  | | Date From: | | | Date To: |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Previous Employer: | |  | | Salary: |  | | |
| Address: |  | | | Postcode |  | | |
| Position |  | | Date From: | | | Date To: |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Previous Employer: | |  | | Salary: |  | | |
| Address: |  | | | Postcode |  | | |
| Position |  | | Date From: | | | Date To: |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Previous Employer: | |  | | Salary: |  | | |
| Address: |  | | | Postcode |  | | |
| Position |  | | Date From: | | | Date To: |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Previous Employer: | |  | | Salary: |  | | |
| Address: |  | | | Postcode |  | | |
| Position |  | | Date From: | | | Date To: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Please provide details of any gaps in your employment history with supporting dates | | | |
| Gap 1 |  | Dates |  |
| Gap 2 |  | Dates |  |
| Gap 3 |  | Dates |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Rehabilitation of Offenders Act** | | | |
| Before completing this part of the form, please read the following notes carefully.  The post you are applying for is exempt from the Rehabilitation of Offenders Act (1974). You must give details on this form of all offences, convictions, cautions or bindovers you have or any cases you have pending subject to the conditions set out below. In May 2013 legislation came into force that provides that certain old and minor cautions and convictions will ln longer be subject to disclosure under the Exceptions Order, 1975.  The amendments to the Exemption Order 1975 (2013) provide that certain spent convictions and cautions are ‘protected’ and are not subject to disclosure to employers, and cannot be taken into account. Please take a look at the filtering rules using the following link:  Filtering rules for criminal record check certificates: <https://www.gov.uk/government/publications/filtering-rules-for-criminal-record-check-certificates>  The list of offences that will never be filtered are available through the following link:  <https://www.gov.uk/government/publications/dbs-list-of-offences-that-will-never-be-filtered-from-a-criminal-record-check> | | | |
| Do you have offences to declare | | | **Yes / No** (please delete as required) |
| Please list details of offence(s), place and date of any judgement(s) and sentence(s): | | | |
|  | | | |
| All information given will be treated in the strictest of confidence and will be used for this job application only.  I certify that, to the best of my knowledge, the information on this form is true and accurate. I understand that if the information I have supplied is false or misleading in any way, it will automatically disqualify me from appointment or may after appointment lead to disciplinary action, which could lead to my dismissal without notice.  I declare that I have read the information above. | | | |
| Signed: |  | Dated: |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Experience** | | | | |
| **Supporting statement and achievements** | | | | |
| Please use this section to show how you meet the requirements of the role you are applying for, referring to your education/ qualifications, experience, knowledge, skills and competencies, paid or unpaid work. | | | | |
| **Supporting Statement:** | | | | |
|  | | | | |
| **References** | | | | |
| References are normally taken prior to interview. For most positions these will cover your current/ most recent employer and one other.  You must provide the names and contact details of all referees or, Ifappropriate, your last school, college or university.It isour practice to contact the relevant HR Departments to confirm that the person given as the referee has authority to write a reference. If you have any gaps in your employment, you must provide us with details of what you were doing this time. | | | | |
| Referee’s Name |  | | Job Title: |  |
| Address |  | | | |
| Postcode |  | | Contact No. |  |
| Email Address |  | | | |
| How do you know them? | |  | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Referee’s Name |  | | Job Title: |  |
| Address |  | | | |
| Postcode |  | | Contact No. |  |
| Email Address |  | | | |
| How do you know them? | |  | | |

|  |  |
| --- | --- |
| **Disability** | |
| The Equality Act 2010 protects people with disabilities from unlawful discrimination. To meet the Act’s definition, a person must have, or have had a physical or mental impairment, which as substantial long term effects on their ability to carry out normal day to day activities. If we know that you have a disability we will make adjustments to the working arrangements and/ or the working environment provided it is reasonable in the circumstances to do so. | |
| Do you have a disability you wish us to know about at this stage? |  |
| Please let us know if you have any requirements or if you believe there are any reasonable adjustments we should be making during the recruitment and selection process, e.g., providing a sign language interpreter | |
| Requirements: | |

|  |  |  |
| --- | --- | --- |
| **Relations** | | |
| Are you related to, or have a close personal relationship with any Loxford School Trust employee or school Governor/ Director? | |  |
| If yes, please state their name and your relationship with them |  | |

|  |
| --- |
| **Previous Employment with the Trust** |
| If you have been previously employed by the Loxford School Trust, please complete this section   |  |  |  | | --- | --- | --- | | Post held: |  | Date from: To: | | Location: | | Line manager: | | Reason for leaving: | | | |

|  |
| --- |
| **Declaration** |
| By submitting this form, you certify that all information provided is true and that you have not canvassed an employee, Governor or Director directly or indirectly in connection with this application, and will not do so.  You understand that any such activity, or failure to disclose any personal relationship with an employee, Governor or Director of the Trust, will disqualify your application.  You acknowledge that if any of the information is found to be false by virtue of statement or omission after any appointment, you may face disciplinary action, which could result in your dismissal without notice.  You give consent to process the enclosed personnel data under the Data Protection Act 2019 on the understanding that it is used to determine your suitability for the post applied for. |

|  |  |  |  |
| --- | --- | --- | --- |
| **I acknowledge that I understand and accept these terms** | | | |
| Print Name: |  | | |
| Signed: |  | Dated: |  |

|  |
| --- |
| **Protection of your Data / Information** |
| The information you supply on this application form is subject to the current Data Protection Regulations and specifically the General Data Protection Regulation (GDPR) 2018.  **Privacy Notice:** Loxford School Trust use this standard application form for the recruitment and employment of non- teaching staff in schools. The information will be confidentially shared with administrative and management personnel involved directly in the recruitment process within individual schools and with associated Human Resources and payroll services outside the school in the context of your employment application. Anonymous data may be extracted for the purposes of statistic recording.  Once the recruitment process has been completed the application form and associated documents for successful candidates will be retained to form the basis of an employment record and stored safely and securely. Unsuccessful candidates’ details will be securely disposed of in accordance with the guidance’s and erased or destroyed – unless there is specific permission for the information to be retained for future recruitment purposes.  You may update the information should you become aware of any inaccuracies n your submitted application by contacting the email address used to submit the application originally. You can also withdraw your application through the same contact.  For further general information please contact: Information Commissioner’s’ Office – at ico.org.uk |

Recruitment Monitoring Form

|  |  |
| --- | --- |
| Post Applied For: |  |
| Reference: |  |
| In line with the Codes of Practice of the Equality and Human Rights Commission, Loxford School Trust collects and maintains information on gender, ethnic organ and disabilities of its employees. The Trust will also collect and maintain information on sexual orientation, age and religion or belief of its employees. The information you have supplied will be kept confidential.  It would be appreciated if you could complete this section of the application form, which will be separated from the rest of the form before shortlisting selection takes place.  You can be assured that this information will be treated in confidence, and will not be available to short listing or interview panels or to future potential managers. | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Gender** | | | |
|  | Female | □ | Male |

|  |  |  |  |
| --- | --- | --- | --- |
| **Sexual Orientation** | | | |
| □ | Bisexual | □ | Gay Man |
| □ | Gay Woman/ Lesbian | □ | Heterosexual |
| □ | Declined to specify |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Religion** | | | | | | | |
| □ | Agnostic | □ | Atheist | □ | Baha’l | □ | Buddhist |
| □ | Christian | □ | Hindu | □ | Jain | □ | Jewish |
| □ | Muslim | □ | No Religion | □ | Sikh | □ | Any Other Religion or Belief |
| □ | Prefer not to say | | | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Ethnic Group** | | | |
| □ | African | □ | Any Other Asian Background |
| □ | Any other Black Background | □ | Any Other Mixed Background |
| □ | Any Other White Background | □ | Any Other Ethnic Background |
| □ | Bangladeshi | □ | British- White |
| □ | Caribbean | □ | Chinese |
| □ | Irish | □ | Indian |
| □ | Pakistani | □ | White and Asian |
| □ | White and Black African | □ | White and Black Caribbean |
| □ | Declined to specify |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Do you consider that you have a disability under the Equality Act 2010?** | | | | | |
| The Equality Act 2010 protects people with disabilities. It defines a person as disabled if they have a physical or mental impairment, with is substantial and long term (i.e., has lasted, or is expected to last at least 12 months) and has an adverse effect on the person’s ability to carry out normal day to day activates | | | | | |
| □ | No | □ | Yes | □ | Declined to specify |

|  |  |
| --- | --- |
| **Date of Birth:** |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Advertisement** | |  | | | | | | |
| Where did you hear about the post applied for: | | | | | | | | |
| □ | Local Press | | □ | Word of mouth | □ | College or university course | □ | I have children in the school |
| □ | School website | | □ | Other |