

Vacancy job title:

Inter	rnal use only	
Refe	erence no:	
Date	e received:	

Employment Application Form: Teacher

We are committed to safeguarding and promoting the welfare of children and young people and expect all staff and volunteers to share this commitment.

Please ensure that you complete **all** sections of Part 1 and Part 2 of the application. Please note that providing false information will result in the application being rejected, withdrawal of any offer of employment, summary dismissal if you are in post, and possible referral to the police. Please note that checks may be carried out to verify the contents of your application form. Please complete the form in black ink or type. CVs are not accepted.

Class Teacher

Pa	rt 1: Information for Shortlisting and Intervie	ewing				
Ini	tials Surnam	ne or Fa	mily Na	me		
1.	Letter of Application					
	Please enclose a letter of application. Please refer to on how to complete the letter of application.	the appl	icant inf	formatior	n pack which	may include instructions
2.	Current/Most Recent Employment: If Teaching					
	Name, address and telephone number of school:					
	Type of school:	Boys	Girls	Mixed	Age range	Number on Roll
	Type of school: (E.g. Community, Aided, Academy, Foundation, Free School, Independent, etc.)					
	. 1					

Salary:

Please enclose a copy of the job description

Subjects/age groups taught:

Date appointed to this post:

	Date availabl	e to begin new job:							
3.	Current/Most	: Recent Employme	ent: If Non-1	Teaching					
	me, address ar	nd telephone numb	er of emplo	yer:					
	Job title: Please er	nclose a copy of the	job descrip	tion					
	Date appoint	ed to this post:							
	Salary:								
	Date availabl	e to begin new job:							
4.	Full Chronol	ogical History							
	any post-seco	de a full history in do ondary education/to I dates, explanation	raining, and	part-time a	nd volur	itary work	as well as f	ull time employmer	nt, with
	Job title or position	Name and add school, other or description activity	employer,	Number o and type o school, if applicable	f	F/T or P/T	Dates From	(DD/MM/YYYY) To	Reason for leaving
Ple	ease enclose a	continuation sheet	if necessary						
5.	Secondary Ed	ducation and Quali	fications						
	Name of scho	ool/college	From		То			ination passed (i.e.), subject and grade	

6. Higher Education

Name and address of	Dates				Date of	Age groups
university, college and/or university education department	From	То	Full or part-time	Courses/subjects taken and passed	examination and qualifications obtained	for which trained

7. Professional Courses Attended as a Teacher

Please list relevant courses attended in the past 3 years.

	Subject	Organising body	Date(s)	Duration
8.	Other Relevant Experience,	Interests and Skills		

9. Referees

Please provide details of two people to whom reference may be made. The first referee should normally be your present or most recent Headteacher or equivalent person. If you are not currently working with children please provide a referee from your most recent employment involving children. Referees will be asked about all disciplinary offences which may include those where the penalty is "time expired" if related to children. Referees will also be asked whether you have been the subject of any child protection concerns, and if so, the outcome of any enquiry. References will not be accepted from relatives or from people writing solely in the capacity of friends.

Fi	rst	R	61	6	re	۵
ГΙ	131	п	CI	_		c

	Title and name:	
	Address and postcode:	
	Telephone number:	
	Email address:	
	Job title:	
	Relationship to applicant:	
Secon	d Referee	
	Title and name:	
	Address and postcode:	
	Telephone number:	
	Email address:	
	Job title:	
	Relationship to applicant:	
		Re up references on shortlisted candidates prior to interview . This is in line with the ing Children Safe in Education statutory guidance.
	Please indicate whether you boxes below.	give consent for references to be requested before interview, by ticking the appropriate
Re	ference 1: Yes	No
Re	ference 2: Yes	No

THIS PAGE IS INTENTIONALLY BLANK

Part 2	Internal Ref. No.
--------	-------------------

This section will be separated from Part 1 on receipt. Relevant responses may be verified prior to shortlisting and/or used for administration purposes but will not then be used for selection purposes.

10. Personal Information

1.	Surname or family name:		
2.	All forenames:		
3.	Title:		
4.	Current address:		
5.	Postcode:		
6.	Home telephone number:		
7.	Mobile telephone number:		
8.	Email address:		
9.	DfE reference number:		
10.	Do you have a current full clean driving licence? Only applicable for posts that require driving	Yes	No
11.	Do you require sponsorship (previously a work permit)?	Yes	No
	permity:	If YES please pro	ovide details under separate cover.

11. Compulsory Declaration of any Convictions, Cautions or Reprimands, Warnings or Bind-overs

It is the School's policy to require all applicants for employment to disclose any previous 'unspent' criminal convictions and any cautions which have not expired, or any pending prosecutions. In addition, the job you are applying for is exempt from the provisions of the Rehabilitation of Offenders Act 1974 (exceptions order 1975) which requires you to disclose all spent convictions and cautions except those which are 'protected' under Police Act 1997 – Part V and the amendments to the Exceptions Order 1975 (2013) and are not subject to disclosure to employers on DBS certificates and cannot be taken into account. Guidance on the filtering of "protected" cautions and convictions which do not need to be disclosed by a job applicant can be found on the Disclosure and Barring Service website.

If you are invited to interview you will be required to disclose your criminal record on an "Invitation to Interview" form and bring the completed form to interview. If the job involves contact with children up to age 8 you will also be required to make a Disqualification Declaration. 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. However, offences relating to children may make you unsuitable since this is a "regulated position" under the Criminal Justice & Courts Services Act 2000.

12. Prohibition from Teaching

In accordance with the requirements of The School Staffing (England) (Amendment) Regulations 2013, any future appointment is subject to a check with the Department for Education to ensure that you are not subject to a prohibition order or an interim prohibition order.

13. Data Protection

The information collected on this form will be used in compliance with Data Protection regulations. By supplying information, you are giving your consent, if appointed, to the information being processed for all employment purposes as defined by statute. 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. 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, your form will be stored securely for a maximum of six months then securely destroyed, unless you are employed as a result of this recruitment process in which case this application form will be retained as part of your personnel record.

14. Notes

- (a) Under the Criminal Justice & Courts Services Act 2000 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'. The position you are applying for is a "regulated position".
- (b) Canvassing, directly or indirectly, an employee or governor will disqualify the application.
- (c) Candidates recommended for appointment will be required to provide a satisfactory Enhanced DBS certificate and complete a pre-employment medical questionnaire and may be required to undergo a medical examination.
- (d) This organisation is under a duty to protect the public funds it administers, and to this end may use the information you may provide as part of the recruitment process for the prevention and detection of fraud. It may also share this information with statutory bodies responsible for auditing or administering public funds for these purposes.

15. Declaration

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:	
Print Name:	
Date:	
Date.	

THIS PAGE IS INTENTIONALLY BLANK

Part 3: Equality and Diversity Monitoring

This section will be separated from part 1 and part 2. 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	Workfor	ce census code	Please tick
White	WBRI	British English Welsh Northern Irish Scottish	cron
	WIRI	Irish	
	WIRT	Traveller of Irish Heritage	
	WROM	Gypsy / Roma	
	WOTH	Any other White background	
Mixed	MWBC	White and Black Caribbean	
	MWBA	White and Black African	
	MWAS	White and Asian	
	MOTH	Any other Mixed background	
Asian or Asian British	AIND	Indian	
	APKN	Pakistani	
	ABAN	Bangladeshi	
	CHNE	Chinese	
	AOTH	Any other Asian background	
Black or Black British	BCRB	Black – Caribbean	
	BAFR	Black – African	
	вотн	Any other Black background	
Other ethnic	ARAB	Arab	
group	CHNE	Chinese	
	REFU	Refused/Prefer Not to Say	
	ООТН	Any other ethnic group	
Sexual orientation	Please tick		
Bi-sexual			_
Gay man			
Gay woman			
Heterosexual			
Other			
Prefer not to s	ay		

Gender	Please tick
Female	
Male	
Transgender	
Prefer not to say	

Personal relationship	Please tick
Single	
Living together	
Married	
Civil Partnership	
Prefer not to say	

Religion or belief	Please tick
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	
Disability	
Dayou consider that you have a	Please tick
Do you consider that you have a	Please lick
disability?	Please lick
	Please lick
disability?	Please tick
disability? Yes - Please complete the grid below	Please tick
disability? Yes - Please complete the grid below No	Please tick
disability? Yes - Please complete the grid below No	Please tick
disability? Yes - Please complete the grid below No Prefer not to say	Please tick
disability? Yes - Please complete the grid below No Prefer not to say My disability is:	Please tick
disability? Yes - Please complete the grid below No Prefer not to say My disability is: Physical Impairment	Please tick
disability? Yes - Please complete the grid below No Prefer not to say My disability is: Physical Impairment Sensory Impairment	Please tick
disability? Yes - Please complete the grid below No Prefer not to say My disability is: Physical Impairment Sensory Impairment Mental Health Condition	Please tick
disability? Yes - Please complete the grid below No Prefer not to say My disability is: Physical Impairment Sensory Impairment Mental Health Condition Learning Disability/ Difficulty	Please tick
Ves - 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	Please tick