



ORCHARD
—Community Trust—



ORCHARD COMMUNITY TRUST

Job Application Form

Completed application forms should be returned to kemball@kemballschool.co.uk

1. Vacancy Details			
Job Title:			
Vacancy ID:		Applicant ID: (for office use only)	
School:		Closing Date:	

2. Source			
<input type="checkbox"/> www.stoke.gov.uk	<input type="checkbox"/> www.wmjobs.co.uk	<input type="checkbox"/> Newspaper (please specify)	
<input type="checkbox"/> Professional Journal (please specify)	<input type="checkbox"/> Social Media (please specify)	<input type="checkbox"/> Other (please specify)	

3. Personal Details					
Title:	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Ms	<input type="checkbox"/> Dr
First Name(s):			Surname		
Address:					
Post Code:			Email:		
Tel No. Home			Tel No. Mobile		
Date of Birth:			National Insurance No.		

Qualified Teacher Status (if applicable)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
DfES Reference no.		Date Issued:
Do you have a full clean driving licence?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have the ability to travel?
		<input type="checkbox"/> Yes <input type="checkbox"/> No

4. Right to Work in the UK (Asylum and Immigration Act 2006)	
If appointed you will be required to provide proof of current and valid permission to be in the United Kingdom and to do the type of work offered. A list of valid documents are available at www.bia.homeoffice.gov.uk	
Are you able to provide the documents required?	<input type="checkbox"/> <input type="checkbox"/>

5. Rehabilitation of Offenders	
Orchard Community Trust welcomes applications from all candidates. Unless the nature of the work demands it, you will not be asked to disclose convictions which are 'spent' under the Rehabilitation of Offenders Act 1974.	
Do you have any unspent convictions?	<input type="checkbox"/> <input type="checkbox"/>
If YES, please give details of the offence(s), including the date and sentence:	

The Rehabilitation Offenders Act 1974 requires applicants to give details of any convictions which are not spent. Failure to disclose such convictions could result in dismissal.

6. Criminal Convictions

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 1975 (as amended in 2013)?

Yes ☐ No ☐

If YES, please provide full details below including the date and nature of the offence:

Orchard Community Trust will check with the DBS Service to see if you have any criminal convictions. For information regarding filtering of convictions please see: <https://www.gov.uk/government/publications/dbs-filtering-guidance>

Are you registered with the Update Service? Yes ☐ No ☐

Any information will be treated as confidential. You should note that disclosing a conviction does not automatically bar you from appointment. Failure to disclosure may result in withdrawal of any job offer in relation to this form.

7. References

Please give the name and address of two people, one of whom must be your present employer (or in the case of a newly qualified teacher your training establishment and one of your placements).

1. Present/Last Employer :

Name:		Title/Position:	
Address:			
Post Code:		Email Address:	
Tel No.		Company:	
Tel No. Mob			

2.

Name:		Title/Position:	
Address:			
Post Code:		Email Address:	
Tel No.		Company:	
Tel No. Mob		In what capacity do you know the candidate?	

Please note – in the interest of safeguarding if your post requires you to work with children we will contact your referees prior to an interview. For all other post references will be sought on appointment

8. Declaration

<p>I declare that all the information I have provided is true, and I have not canvassed a Member of OCT Trust directly or indirectly, in connection with this application and further to that will not do so.</p>			
<p>Signature:</p>		<p>Date:</p>	
<p>To your knowledge are you related to any Members/Employees of Orchard Community Trust? Yes <input type="checkbox"/> No <input type="checkbox"/></p>			
<p>If YES, please specify who:</p>			

Date:

If YES, please specify who:

9. Equality and Diversity - For monitoring purposes only			
Gender:	Female <input type="checkbox"/>	Male <input type="checkbox"/>	Prefer not to say <input type="checkbox"/>
	Applicants should answer this question according to their current gender presentation, which may be different to that assigned at birth		
Marital Status	Single <input type="checkbox"/>	Married <input type="checkbox"/>	Civil Partner <input type="checkbox"/> Widowed <input type="checkbox"/>
	Divorced <input type="checkbox"/>	Dissolved <input type="checkbox"/>	Separated <input type="checkbox"/> Prefer not to say <input type="checkbox"/>
Sexual Orientation	Opposite Sex (Heterosexual) <input type="checkbox"/>	Opposite and Same Sex (Bisexual) <input type="checkbox"/>	
	Same Sex (Lesbian/Gay) <input type="checkbox"/>	Prefer not to say <input type="checkbox"/>	
Disability	Do you consider yourself to be disabled under the Equality Act 2010?		
Ethnic Origin	White <input type="checkbox"/> British <input type="checkbox"/> Irish <input type="checkbox"/> Irish Traveller <input type="checkbox"/> Gypsy/Roma <input type="checkbox"/> Other White Black/Black British <input type="checkbox"/> African <input type="checkbox"/> Caribbean <input type="checkbox"/> Other Black <input type="checkbox"/> Prefer not to say <input type="checkbox"/> Other Please State: _____	Mixed <input type="checkbox"/> White/Asian <input type="checkbox"/> White/Black African <input type="checkbox"/> White/Black Caribbean <input type="checkbox"/> Other/mixed Chinese/Other <input type="checkbox"/> Chinese <input type="checkbox"/> Other	Asian/Asian British <input type="checkbox"/> Pakistani <input type="checkbox"/> Indian <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Other Asian
Religion/Belief	I would describe my religion and belief as: _____ <input type="checkbox"/> No religious Belief <input type="checkbox"/> Prefer not to say		

I would describe my religion and belief as:

No religious Belief

Prefer not to say

[illegible]

Qualification

Subject

Dates

Grade

Professional Qualification/ Membership of Professional Bodies inc DfES/GTC				
Name of Professional Body/Association	Current Level of Membership	Method of Achievement (eg. Application; examination; invitation)	Membership Number	

11. Training and Development (continue on a separate sheet if required)			
Training	Date Completed	Training	Date Completed

12. Supporting Information (continue on a separate sheet if required)

Please tell us why you are suitable for the job and provide as much information as you can about your skills, abilities, knowledge and experience.

13. Current/Last Employment * Previous employers may be contacted to validate information provided.

Name of Employer			
Address			
Post Code		Telephone Number	
Job Title		Local Authority	
Date: From		Date: To	
Salary including details of allowances/benefits e.g. TLR, SEN, R&R Leadership Range			
Brief Description of your current/Last Job			
Reason for leaving/wanting to leave		Notice Period	

14. Previous Employment * Start with the most recent (continue on a separate sheet if required).			
Name of Employer			
Address			
Post Code		Tel No.	
Job Title		Salary	
Date From		Date To	
Brief Description of your role			
Reason for Leaving			

Name of Employer			
Address			
Post Code		Tel No.	
Job Title		Salary	
Date From		Date To	
Brief Description of your role			

Reason for Leaving			

Name of Employer			
Address			
Post Code		Tel No.	
Job Title		Salary	
Date From		Date To	
Brief Description of your role			
Reason for Leaving			

Name of Employer			
Address			
Post Code		Tel No.	
Job Title		Salary	
Date From		Date To	
Brief Description of your role			
Reason for Leaving			

If you have any gaps in your employment or education, please explain them here (continue on a separate sheet if required)			

Please detail below any dates when you would not be able to attend an interview. Every effort will be made to avoid these dates but this may not always be possible.			

General Data Protection Regulation (UK GDPR)

If my application is successful, I hereby give my consent for the information provided on this application form to be held on computer or other relevant filing systems and to be shared with other accredited organisations or agencies in accordance with the General Data Protection Regulation (UK GDPR).

If my application is unsuccessful, I understand that it will remain on file for six months and then destroyed.

Signature: _____

Date: _____

In line with GDPR, please ensure you complete the following form to enable your references to be collected regarding attendance and disciplinary data.



Permission from Candidates in relation to references:

Title Mr/Mrs/Miss/Ms/Dr

Full candidate name: _____

Position applied for: _____

I have applied for the above position

I understand that in order to complete my application for interview stage, references must be sought on my behalf and are a statutory requirement for any employee or volunteer position within education in line with Safer Recruitment in Education.

I hereby grant full permission for my professional records including attendance and disciplinary data to be shared with Orchard Community Trust.

Signature: _____

Date: _____