­ **CONFIDENTIAL**

**TEACHING ROLES APPLICATION FORM**

|  |  |
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| **POST APPLIED FOR:** |  |
| Please state where advertisement seen |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal details** | | | | | | | | | | | | | | | | | | | | |
| **Preferred title:** | | | |  | | Dr | | | | |  | | Lady | | | |  | | | Lord |
|  | | | |  | | Miss | | | | |  | | Mr | | | |  | | | Mrs |
|  | | | |  | | Ms | | | | |  | | Prof | | | |  | | | Rev |
| **Forenames (given name):** | | | |  | | | | | | | | | | | | | | | | |
| **Surname (family name):** | | | |  | | | | | | | | **Previous Surname:** | | |  | | | | | |
| **Known as:** | | | |  | | | | | | | | | | | | | | | | |
| **Email address:** | | | |  | | | | | | | | | | | | | | | | |
| **Home telephone number:** | | | |  | | | | | | | | | | | | | | | | |
| **Work telephone number:** | | | |  | | | | | | | | | | | | | | | | |
| **Mobile telephone:** | | | |  | | | | | | | | | | | | | | | | |
| **Preferred contact telephone number:** | | | | **Home** | | | | | | | **Work** | | | | | **Mobile** | | | | |
| **Address 1:** | | | |  | | | | | | | | | | | | | | | | |
| **Address 2:** | | | |  | | | | | | | | | | | | | | | | |
| **Town/city:** | | | |  | | | | | | | | | | | | | | | | |
| **County:** | | | |  | | | | | | | | | | | | | | | | |
| **Postcode:** | | | |  | | | | | | | | | | | | | | | | |
| **Do you possess a current driving licence?** | | | | | | | | | | | | | | | | | | | | |
| Yes | | | | | | | | No | | | | | | | | | | | | |
| **Do you have the use of a vehicle or other appropriate means of transport?** | | | | | | | | | | | | | | | | | | | | |
| Yes | | | | | | | | No | | | | | | | | | | | | |
| **National Insurance number:** | | | | | | |  | | | | | | | | | | | | | |
| **Employment history** | | | | | | | | | | | | | | | | | | | | |
| **Present Employer** *(Please state if unemployed)* | | | | | **Post Held** | | | | **Start Date** | | | | | **Notice Required** | | | | | **Salary/Grade** | |
|  | | | | |  | | | |  | | | | |  | | | | |  | |
| Please give details of your employment history | | | | | | | | | | | | | | | | | | | | |
| **Post Held** | **Name & Address of Employer** | | | | | | **Start Date** | | | | **Finish Date** | | | **Reasons for leaving** | | | | | **Salary/Grade** | |
|  |  | | | | | |  | | | |  | | |  | | | | |  | |
| If there are any gaps in your employment or education history please explain them here: | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| **Secondary school/college/higher education attended/professional qualifications/training** | | | | | | | | | | | | | | | | | | | | |
| Shortlisted candidates will be expected to provide evidence of the qualifications listed on this application. | | | | | | | | | | | | | | | | | | | | |
| **Qualifications** | | **Grade/Level** | | | | | | | | **Awarding body** | | | | | | | | **Date** | | |
|  | |  | | | | | | | |  | | | | | | | |  | | |
| **Other relevant qualifications and training taken, including short courses with dates** | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| **Membership of professional bodies/technical bodies** | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| **Relevant Experience** | | | | | | | | | | | | | | | | | | | | |
| Please use this section to explain how your skills, experience and knowledge would make you a suitable candidate for the post. This could include voluntary work, leisure interests and other activities, which you consider relevant to the position. In completing this section it is important that you refer to the requirements in the job description/person specification and provide evidence of how you meet the essential and desirable criteria (where applicable). | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| **References** | | | | | | | | | | | | | | | | | | | | |
| Please provide contact details for two people who have agreed to give an employment reference on your behalf. These references must be from your current Headteacher or most recent employer. The school also reserves the right to approach any previous employer to confirm factual information about your previous employment record.  Note: References will be taken up prior to interview if you are shortlisted. If you wish to be contacted before references are taken up please tick the box | | | | | | | | | | | | | | | | | | | | |
| **First reference:** | | | | | | | | | | | | | | | | | | | | |
| **Name of referee:** | | |  | | | | | | | | | | | | | | | | | |
| **Employer’s name:** | | |  | | | | | | | | | | | | | | | | | |
| **Address 1:** | | |  | | | | | | | | | | | | | | | | | |
| **Address 2:** | | |  | | | | | | | | | | | | | | | | | |
| **Town/city:** | | |  | | | | | | | | | | | | | | | | | |
| **County:** | | |  | | | | | | | | | | | | | | | | | |
| **Postcode:** | | |  | | | | | | | | | | | | | | | | | |
| **Telephone number:** | | |  | | | | | | | | | | | | | | | | | |
| **Email address:** | | |  | | | | | | | | | | | | | | | | | |
| **Relationship to you (e.g. manager/headteacher):** | | |  | | | | | | | | | | | | | | | | | |
| **Second reference:** | | | | | | | | | | | | | | | | | | | | |
| **Name of referee:** | | |  | | | | | | | | | | | | | | | | | |
| **Employer’s name:** | | |  | | | | | | | | | | | | | | | | | |
| **Address 1:** | | |  | | | | | | | | | | | | | | | | | |
| **Address 2:** | | |  | | | | | | | | | | | | | | | | | |
| **Town/city:** | | |  | | | | | | | | | | | | | | | | | |
| **County:** | | |  | | | | | | | | | | | | | | | | | |
| **Postcode:** | | |  | | | | | | | | | | | | | | | | | |
| **Telephone number:** | | |  | | | | | | | | | | | | | | | | | |
| **Email address:** | | |  | | | | | | | | | | | | | | | | | |
| **Relationship to you (e.g. manager/headteacher):** | | |  | | | | | | | | | | | | | | | | | |

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| *The school welcomes applications from disabled people and all sections of the community. For this purpose “disability” means any physical or mental impairment which has a substantial and long term (over 12 months) adverse effect on your ability to carry out normal day to day activities.*  Are you a registered disabled person? YES  NO  If “yes” please indicate below if (a) you have any special requirements regarding attendance at interview and/or (b) if you are aware of any adjustments that Highcliffe School could make to help you to carry out the job. |

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| **Are you related to or have any current connections with Highcliffe School eg: an employee of the school, a student, or a governor of the school?** | | |
| Yes | No | |
| **If yes, please give details:** | | |
|  | | |
| **Declarations**  Do you hold qualified teacher status (QTS)? Yes  No  Date of Award       TRN (if applicable)  Are you subject to any sanctions imposed by Teaching Regulation Agency Yes  No  If Yes, please give details  **Induction Period (Applicable to those teachers who qualified after 7 May 1999):**  Have you successfully completed a period of probation? Yes  No | | |
| The post you are applying for is exempt from the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment (England and Wales) Order 2020. You are required to reveal any information concerning spent or unspent convictions, cautions, reprimands or warnings if shortlisted. | | |
| Do you have any spent or unspent convictions, cautions, reprimands or warnings? | | |
| Yes | | No |
| Are you barred from working with children or vulnerable adults? | | |
| Yes | | No |
| For the purpose of the Data Protection Act 2018 I give my consent to this form and related information being processed and retained on file and to the school verifying the information I have provided with relevant third parties in administering its recruitment process. I authorise the school to use this the information contained within the form, and any related information, in order to further my application for employment. I understand that the school may seek to verify the information I have provided with relevant third parties in administering its recruitment process.  I declare that the information given on this form is to the best of my knowledge and belief correct and I understand that if I give you any false information or fail to provide full and complete information it may lead to withdrawal of any offer of appointment, or my dismissal if I am appointed. I further understand that canvassing employees, senior members of staff or governors either directly or indirectly will disqualify me for appointment.  I understand that my application will be handled in accordance with the provisions of the schools privacy notice\* and understand that my application will be handled in accordance with the provisions of the same.  \*The Schools Privacy Notice is available upon request.  I understand that if my application is successful I will be required to undertake a DBS disclosure at the enhanced level.  I understand that, if I am shortlisted, the school will carry out an online search about me that is publicly available online. This will include any social media accounts I hold. This processing of data will be conducted under the legal basis of Article 6(e) public task in line with the guidance laid out in para 221 of Keeping Children Safe in Education (KCSIE) 2022. Any data collected during this search will be retained in line with our retention schedule which is available on request. | | |
| I agree to the declarations made on this form | | |
| **Signed: Date:**  All candidates applying for employment via email (unless electronically signed) will be required to sign and date this form if invited to attend an interview. | | |

**Return to:** Mrs A Parsons, PA to Headteacher - email: [aparsons@highcliffeschool.com](mailto:aparsons@highcliffeschool.com)

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| **Diversity questionnaire** | | | | | | | | | | | |
| We will seek to ensure that all existing and potential employees are given equal opportunities. We are committed to diversity and equality of opportunity in our employment policies and practices. Our aim is to promote diversity so that no employee or potential employee will be subject to unlawful or unfair discrimination because of gender, age, marital or civil partnership status, colour, race, nationality or other ethnic or national origin, disability, religion, sexual orientation, gender reassignment, pregnancy or maternity or membership or non-membership of a trade union or political beliefs. We will seek to ensure that no applicant for employment is disadvantaged by conditions or requirements which cannot be justified.  In order to help us monitor the effectiveness of our Diversity Employment Policy (and for no other reason) all applicants are asked to provide the information requested below. This information is confidential and does not form part of your application and will not be taken into account when making the appointment. | | | | | | | | | | | |
| **Which of the following best describes your ethnic origin?** | | | | | | | | | | | |
|  | White British | | |  | White Irish | |  | | | Any other white background | |
|  | White and Black Caribbean | | |  | White and Black African | |  | | | White and Asian | |
|  | Any other mixed background | | |  | Indian | |  | | | Pakistani | |
|  | Bangladeshi | | |  | Chinese | |  | | | Any other Asian background | |
|  | Caribbean | | |  | African | |  | | | Any other black background | |
|  | Arab | | |  | Gypsy/Romany | |  | | | Irish Traveller | |
|  | Any Other Ethnic Background | | |  | | | | | | | |
| **Gender** | | | | | | | | | | | |
| Male | | | Female | | | | | Prefer not to say | | | |
| Transgender Male | | | Gender Variant/Non-Conforming | | | | | Not Listed | | | |
| Prefer not to say | | |  | | | | |  | | | |
| **Which of the following best describes your sexual orientation?** | | | | | | | | | | | |
| Heterosexual/Straight | | | Bisexual | | | | | Gay/Lesbian | | | |
| Other | | | Prefer not to say | | | | |  | | | |
| **Do you consider yourself to have a disability?** (for this purpose disability means any physical or mental impairment which has a substantial and long term adverse effect on your ability to carry out normal day to day activities) | | | | | | | | | | | |
| Yes | | | No | | | | | Prefer not to say | | | |
| **If you have answered yes to the above, please state type of disability which applies to you** | | | | | | | | | | | |
| Speech impairment | | Learning disability | | | | Mental health illness | | | | | Physical impairment |
| Hearing impairment | | Visual impairment | | | | Long standing illness or health condition | | | | | |
| **Please indicate below if you have any special requirements regarding attendance at interview** | | | | | | | | | | | |
| **Date of birth :** | | | | | | | | | | | |
| **Which of the following best describes your faith/religion/belief?** | | | | | | | | | | | |
| Hindu | | | None/no religion | | | | | | Christian | | |
| Muslim | | | Jewish | | | | | | Buddhism | | |
| Spiritualist | | | Prefer not to say | | | | | |  | | |