

**APPLICATION FORM**

Please fill in **all** **relevant** **sections** of the form using **black ink**/type. The information you provide will help us make a fair decision in the selection process. **Please note,** **CVs are not accepted.** Applications received after the closing date will not normally be considered. Applications should be returned to: \*\*

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| **POSITION TITLE:** |  |
| **LOCATION:** |  |

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| **HOW WE PROTECT YOUR PERSONAL INFORMATION:** |
| We keep on file information from this application form, equal opportunities form and any documents you attach. This is required for recruitment and equal opportunities monitoring purposes, the payment of staff and the prevention and detection of fraud. All information will be dealt with in accordance with data protection legislation and will not be sold to any third party. Unsuccessful application forms will be destroyed in accordance with our retention policy; anonymised data will be kept for monitoring purposes. |

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| **PERSONAL DETAILS:** | | | |
| Title |  | Surname |  |
| First name(s) |  | Previous Surname (if applicable) |  |
| Home address |  | Home Tel No: |  |
| Mobile No: |  |
| Email address: |  |
| Work Tel |  |
| Postcode |  | NI Number |  |

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| **GENERAL INFORMATION** |
| If you have a disability, can we make any particular interview arrangements (e.g. signer, ground floor interview room etc) to assist you if shortlisted? |
| If yes, please specify here: |
| Are there any dates that you would be unable to attend an interview? |
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| If yes, please specify here: |
| ***Please assume if you have not heard from us within 28 days of the closing date that on this occasion you have not been shortlisted for this position.*** |

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| **REFERENCES:** | | |  | | | | |
| Please provide references from **two different employers** [unless you have only had one previous employment of any kind). **Do not use friends or relatives. Please be aware that we will ask for references before your interview.** If any of your previous roles [voluntary or paid] involved working with children, young people and/or vulnerable adults, we will ask for information about past disciplinary issues relating to these vulnerable groups [including any in which the time penalty ‘time expired’), and whether you have been subject to any child/vulnerable adult protection concerns and the outcome of any enquiry or disciplinary procedure. | | | | | | | |
| **Reference 1**: This **must** be your current or most recent employer or, if you do not have any previous employment, your most recent tutor (Academy, School/College or university). | | | **Reference 2**: If you have worked with children, young people or vulnerable adults in the past, but are not currently; this **must** be the most recent employer with whom you were employed to work with these vulnerable groups. Otherwise, a reference of your choice. | | | | |
| Name and Job Title: |  | | Name and Job Title: |  | | | |
| Employer |  | | Employer |  | | | |
| Address |  | | Address |  | | | |
| Postcode | |  | Postcode | | |  | |
| Email | |  | Email | | |  | |
| Professional relationship to you | |  | Professional relationship to you | | |  | |
| Did this role involve working with young people and /or vulnerable adults? | | **Yes / No**  Please select | Did this role involve working with young people and /or vulnerable adults? | | | **Yes / No**  Please select | |
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| **QUALIFICATIONS ACHIEVED FROM SECONDARY, FURTHER AND HIGHER EDUCATION** | | | | | | | |
| **Awarding body** | | **Level and subject of qualifications**  **(eg O Level, GCSE, A Level, degree, teaching qualifications/Other)** | | | **Grade awarded** | | **Year achieved** |
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| **TRAINING & DEVELOPMENT RELEVANT TO THE POST APPLYING FOR:** | | | | | | | | | |
| **Name of training & development course (e.g. Curriculum, first aid, health and safety, child protection, risk assessments etc)** | | **Provider/Awarding body** | | | | | **Grade** | | **Year achieved** |
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| **COMPLETE THIS SECTION IF APPLICABLE** | | | | | | | | | |
| Do you have Qualified Teacher Status? | | | | | | | **Yes / No**  Please select | | |
| Date achieved | |  | | | | | | | |
| DFE Teacher reference number | |  | | | | | | | |
| Statutory induction period (if qualified after 7 May 1999) | | Started: | | | | Completed: | | | |
| Are you subject to any conditions or prohibitions placed on you by the GTC  (or other) in the UK? | | | | | | | **Yes / No**  Please select | | |
| If Yes, please enclose details with dates in a sealed envelope and attach to this form. | | | | | | |  | | |
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| **EMPLOYMENT HISTORY** | | | | | | | | | |
| **Note:** If you are currently working through a supply agency, please ensure you also provide the name of the agency under “Employer’s name and address”. If you are applying for your first job, please provide any voluntary work/work experience in the “Previous employment or experience” section. | | | | | | | | | |
| Employer name | |  | | | Job title |  | | | |
| Number on Roll (if applicable) |  | Age Group taught (if applicable) |  | |
| Employer  address | |  | | | Current Salary (state in figures) | **£** | | | |
| Start date |  | | | |
| Leave date  (if applicable) |  | | | |
| Reason for leaving | |  | | | | | | | |
| Main duties and responsibilities | |  | | | | | | | |
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| **PREVIOUS EMPLOYMENT OR EXPERIENCE** | | | | | | | | | |
| Start with your most recent employment first and work backwards.  You must explain any gaps in your work history since you left education (e.g. unemployment; career breaks; voluntary work; travel). | | | | | | | | | |
| **Dates**  **(dd/mm/yy)** | | | **Name of Academy/Employer**  **and Address**  **or**  **Reason for gap in employment** | **Job title, duties & responsibilities**  **(including Number on Roll and Age Group taught, if applicable)** | | | **Reason for leaving** | | |
| **From** | **To** | |
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| **YOUR SUPPORTING STATEMENT** |
| Please refer to the job description supplied and tell us how your skills and experience match the person specification. Use examples where possible and provide the situation or task, your action(s) and the result.  If you are applying for your first job, provide examples of other relevant experience that will help us decide your suitability, eg gained through training, education, the community etc. Please continue on separate sheet if required – Approx 2 pages maximum (font size 11 minimum) |
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| **DISCLOSURE OF INTEREST:** | | |
| Are there any restrictions to you living and working in the UK, which might affect your right to work for us (e.g. needing a work permit/visa)? | | **Yes / No**  Please select |
| If yes, please provide details: | | |
| **The role information supplied will say if this post requires travel and, if so, if you need access to transport and/or a full current UK driving licence.** | | |
| If needed, do you have access to transport? | | **Yes / No**  Please select |
| If needed, do you have a full current UK driving licence? | | **Yes / No**  Please select |
| The Working Time Regulations (1998) require us to check the hours worked by employees. Would this role be your only employment? | | **Yes / No**  Please select |
| If no, please provide details of your other role(s) and the days and hours you work: | | |
| **Canvassing of our Governors and employees** (asking them to help you get this role), directly or indirectly, for any appointment will disqualify your application. If you fail to declare any relationship with a Governor or employee of Southerly Point, your application may be disqualified and, if appointed, you may be dismissed without notice. | | |
| Are you related to, or have you formed any relationship (personal, financial or professional) with any current Governor, Trustee or employee of Southerly Point. | | **Yes / No**  Please select |
| If yes, please provide details: | | |
| Do you, your partner or family have any interests (personal, financial or professional) that may conflict with you doing this role? | | **Yes / No**  Please select |
| If yes, please provide details: | | |
| Have you ever been the subject of a formal disciplinary procedure?  Have you ever been dismissed from any previous employment? | | **Yes / No**  Please select |
| If yes, please provide details: | | |
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| **YOUR DECLARATION:** | | |
| I understand that any employment, if offered, will be subject to the information on this form being correct and I confirm that no valid information has been wilfully withheld. I understand that if I am appointed, I am liable to dismissal without notice if the information on this form is later proved inaccurate. | | |
| **Signature** | **Date** | |
| Please sign and date if you are returning the form by post. If returning by email, you will be asked to sign a copy before any offer of employment is made. | | |
| **If you have completed this form on behalf of the applicant, please add your details:** | | |
| Name (printed) | Contact number | |

Thank you for taking the time and effort to complete this application form. The role information supplied will say where it should be returned.

**Please ensure you complete our Safeguarding Form.**

**Safeguarding Form - Confidential**

Please fill in **all** **sections** of the form using **black ink**/type. The information you provide will help us make a fair decision in the selection process.

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| **SAFEGUARDING CHILDREN, YOUNG PEOPLE & VULNERABLE ADULTS** |
| It is the responsibility of all employees and volunteers to maintain awareness of policies and practices regarding the safeguarding of children, young people and vulnerable adults.  From your training and/or experience, please give examples which demonstrate your knowledge and commitment to safeguarding and how you would help protect children, young people and adults at risk from harm, abuse or neglect. A**pproximately 200 words** |
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**Criminal Convictions and Disqualification Declaration**

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| **Section A:**  **DECLARATION OF CRIMINAL CONVICTIONS:** | |
| This post is covered by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975.  You are therefore required to declare whether you have any criminal convictions (or cautions, reprimands or warnings) including those, which are ‘spent’.  The amendments to the Rehabilitation of Offenders Act 1974 [exceptions] Order 1975 [2013 and 2020] provides that when applying for certain jobs and activities, certain convictions and cautions are considered 'protected'. This means that they do not need to be disclosed to employers, and if they are disclosed, employers cannot taken them into account.  Guidance and criteria on the filtering of these cautions and convictions can be found on the [Disclosure and Barring Service website](https://www.gov.uk/government/collections/dbs-filtering-guidance). | |
| Do you have any unspent conditional cautions or convictions under the Rehabilitation of Offenders Act 1974? | Yes / No |
| Do you have any adult cautions (simple or conditional) or spent convictions that are not protected as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2020? | Yes / No |
| Do you have any charges pending or are you under investigation by the Police? | Yes / No |
| Have you ever been barred or restricted from working with children, young people and/or vulnerable adults? | Yes / No |

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| **SECTION B**  **Further information and declaration** | | | | | | |
| If you have answered yes to any of the above questions, please provide further information below: | | | | | | |
| **Declaration:**  I confirm that the information I have declared above is correct and I accept that if any of the information I provide is found to be false or misleading I may be disqualified from appointment.  I understand that I have a duty to inform my employer should any of this information change at any time during my employment. I understand that any subsequent offer of employment will be subject to the satisfactory outcome of all required safeguarding, vetting and barring checks. | | | | | | |
| **Signature (applicant):** | |  | | **Date:** |  | |
| Print full name: | |  | | | | |
| Please sign and date if you are returning the form by post. If returning by email, you will be asked to sign a copy before any offer of employment is made. | | | | | | |
| If you have completed this form on behalf of the applicant, please add your details: | | | | | | |
| Name (printed): |  | | Contact number: | | |  |