CHILTERN WAY ACADEMY TRUST SUPPORT STAFF APPLICATION FORM

APPLICATION FOR THE POST OF:





SURNAME:	FORENAME(S):
TITLE:	Please give details of any previous surnames:
ADDRESS FOR CORRESPONDENCE:	TELEPHONE NUMBERS
	HOME:
POSTCODE:	WORK: May we contact you at work? Yes/No
E-MAIL ADDRESS:	MOBILE:
	NATIONAL INSURANCE NUMBER:
Employ	ment History
PRESENT OR MOST RECENT EMPLOYMENT	
Name & address of employer:	Job title and summary of main duties:
Nature of business:	Are you still currently employed by this organisation?
Date of appointment: dd/mm/yyyy	Salary Scale and Current Salary:
Reasons for leaving (If applicable):	Notice required:

PREVIOUS EMPLOYMENT

Please summarise your employment history since leaving full-time education, paid or unpaid, or working in a voluntary organisation or agency, full or part-time. Start with the most recent. Please continue on a separate sheet if necessary.

Employer's name and address	From month / year	To month / year	Job title and summary of main duties	Reasons for leaving

since leaving full-time education.

Please describe the reason and duration of any period(s) longer than 1 month when you have not been in employment

Qualifications and training

EDUCATIONAL AND ACADEMIC QUALIFICATIONS (Secondary, Further/Higher or work based)

Examination, course

School, College, University

Please give details of your education with examination dates, results and qualifications obtained. Please include any training and membership of professional bodies, relevant to the application. (Please continue on a separate sheet if necessary) Evidence of qualifications may be requested.

From

То

Result/Qualifications gained

		(with dates)			
INSERVICE 1	TRAINING Give	e details of the most recent, releva	nt courses atte	ended and ind Duration	licate any awards earned. Dates
		Refe	rences		
should be you	ur present or most	o have knowledge of you in a work t recent employer. If you are a stu- period. It is the normal practice for	dent, give app	ropriate school	ent, paid or unpaid. The first reference of or college referees. References must ed before any formal interview.
If you were kr	nown to either of y	our referees by another name plea	ase give detail	s:	
Referee c	f this is your cur confirm that we c nterview. Yes/	rent employer please can contact before No	2 nd Referee.		
Name:			Name:		_
Position:			Position:		
Address:			Address:		
E-mail address:			E-mail address:		
Tel:			Tel:		

In what capacity does the above know you	In '	what	capacity	does	the	above	know	vou
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In what capacity does the above know you?

Achievements, personal qualities and skills

Please use this section to say why you are applying for this job. Give details of any work or other experience you have which may be relevant to your application, including voluntary work and leisure interests. The information you provide about your experience, knowledge, skills and abilities enables us to assess your application. Make sure you read the job description and person specification before completing the application form and refer to it throughout. Provide as much information as possible, giving us examples, either from your home or work life, to show how you meet what we are looking for.
Please continue, if necessary, on a further sheet, which must be attached securely to this form.

Additional Information

- To comply with the Asylum and Immigration legislation during the selection process you will be required to give evidence of your ability to work in the UK.
- 2. Under the Working Time Directive, you should not work more than 48 hours a week. Do you plan to undertake work for other employers, which would cause a breach of these regulations?
 If so, please give details:

Yes/No

3. Do you hold a full current driving licence?

Yes/No

4. Are you able to travel to different locations across the County?

Yes/No

Have you ever been subject to any disciplinary action by your employer or professional body?If yes, please give details

Yes/No

6. Are you a relative or partner of any employee of the Academy and/or trustee of the Academy? If yes, please state name of person and relationship:

Yes/No

- 7. If you have a disability please let us know of any special arrangements which would assist if you are short listed for interview:
- 8. Where did you see the advertisement for this post? Please circle: TES; BC job website; BC social media; careers fair; local press; national press; trade press; other website

Data Protection

Your data will be processed in accordance with data protection legislation. Processing of your data will take place either because:

- You consent to your data being processed
- Processing is necessary to evaluate your application for the position for which you have applied
- · Processing is necessary for complying with legal obligations
- Processing is necessary for our legitimate interests

For further information, please see our privacy notice for job applicants.

Declaration

I agree that any offer of employment with Chiltern Way Academy Trust is subject to satisfactory evidence of the right to work in the UK, satisfactory references, DBS check and other pre-employment vetting checks.

In accordance with the Data Protection Act (2018), Chiltern Way Academy Trust will hold and use my personal information about me for personnel reasons and to enable the organisation to keep in touch with me. This information will be stored in both manual and/or computer form. I understand that my data will be used in connection with recruitment and may be passed to non-Academy employees, such as Academy Trustees, consultants and referees in connection with my application for a role. If unsuccessful, information will be held in line with our retention standards.

Chiltern Way Academy Trust is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

For further information see our Privacy Policy

I confirm that the information given in this application and any attachments is factually correct and complete and I understand that any false information may, in the event of employment, result in dismissal or disciplinary action by the school.

Signed:	Date: /	/
Sign e u.	Dale.	/

It is an offence to seek employment in regulated activity if you are on a barred list.

Please note, you will be asked to sign this form if you are invited to an interview.

Please email your completed form to HR@chilternway.org

Alternatively, post to HR Department, Chiltern Way Academy Trust, Church Lane, Wendover HP22 6NL

If you have not been contacted within 3 weeks of the closing date, you must assume that your application has, on this occasion, been unsuccessful.

Please complete the Recruitment Monitoring information.

Recruitment **Monitoring**



Chiltern Way Academy Trust operates a Diversity Policy and is committed to appointing the best candidate, on the basis of their ability to do the job.

The Codes of Practice published by the Equality and Human Rights Commission advise employers to monitor the outcome of selection decisions to ensure that discrimination does not occur within our recruitment and selection process.

The information you give is confidential and is used for monitoring purposes only.					
Application for the post of:					
Full name:	Full name:				
Date of birth: dd/mm/yyyy					
Please complete the sections below					
All questions are optional. You are not obliged to answer any of these questions but the more information you supply, the more effective our monitoring will be. All information supplied will be treated in the strictest confidence. It will not be placed on your personnel file.					
Thank you for your assistance.					
GENDER					
What is your gender (please tick)?					
Male	[]				
Female	[]				
Prefer not to say	[]				
(If you are undergoing gender reassignment, please use the gender you identify with.)					
RELIGION OR BELIEF					
Please describe your religion or other strongly-held belief.					
I would describe my religion or belief as:					
I have no particular religion or belief		[]			
Prefer not to say		[1			

ETHNIC GROUP					
How would you describe your	nationality	and/or ethnicity (please tick)?			
Α		В		С	
White:		Mixed race:		Asian or Asian Britis	sh:
British - English, Northern Irish, Scottish or Welsh	[]	White and Black Caribbean	[]	Indian	[]
Irish	[]	White and Black African	[]	Pakistani	[]
Other White background	[]	White and Asian	[]	Bangladeshi	[]
D		E			
Black or Black British:		Chinese and other groups	:		
Caribbean	[]	Chinese	[]	Prefer not to say	[]
African	[]	Other ethnic group	[]		
Other Black background	[]				
DISABILITY					
The Equality Act 2010 defines on a person's ability to carry or months.	s a disabilit out normal	ry as a "physical or mental imp day-to-day activities". An effec	airment wh t is long-te	nich has a substantial and erm if it has lasted, or is lik	long-term adverse effect kely to last, more than 12
Do you consider that you have	e a disabilit	ty under the Equality Act (pleas	se tick)?		
Yes		[] No			[]
Used to have a disability but recovered	have now	[] Don't l	know		[]
Prefer not to say		[]			