|  |  |
| --- | --- |
| For Office Use Only: | |
| Application Number: |  |



Coolinge Lane

Folkestone

Kent CT20 3RB

# Tel: 01303 251125 Fax: 01303 248651

### CONFIDENTIAL

##### Application for Employment

#### Applicant’s Details

**Please complete using black ink or type.**

|  |  |
| --- | --- |
| **Post Applied for:** |  |
|  |  |
| **Closing Date:** |  |
|  |  |
| **Where Did You See This Post Advertised:** |  |
|  |  |
| **Title:** |  |
|  |  |
| **Surname:** |  |

|  |  |
| --- | --- |
| **First Name:** |  |

**SOME GUIDELINES TO HELP YOU…**

This School is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment*.* Our staff play a vital role in providing excellent services to the school community. To help achieve this we will train you to do your job and encourage you to look for every opportunity to use your skills and abilities. This is your opportunity to tell us as much as possible about yourself and will help us make a fair decision in the selection process. Please read the job description/person specification carefully before completing this form.

Please ensure that you complete **ALL** sections.

Your application will be treated in the strictest confidence.

## General Information About You

|  |  |
| --- | --- |
| Home Address |  |
| Address for communications (if different) |  |
| Home Tel No: |  |
| Mobile Tel No: |  |
| E-mail Address |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Do you have a current UK driving licence (if applicable)? | **Yes** |  |  | **No** |  |
| Do you have any current endorsements? | **Yes** |  |  | **No** |  |
| If Yes please give details. |  | | | | |

|  |  |
| --- | --- |
| If you are successful, when could you start this job? |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Are you related to any member of staff or Governor of FSG? | **Yes** |  |  | **No** |  |
| Are you aware of any matter, which might call into question your integrity as an employee or bring you/or FSG into disrepute. | **Yes** |  |  | **No** |  |
| If Yes please give brief details. |  | | | | |

|  |
| --- |
| **Employment** |

**Present or most recent employment details.** (Any employer, current or previous, will be asked about disciplinary offences relating to children, including any in which the penalty is ‘time expired’ and whether the applicant has been the subject of any child protection concerns, and if so, the outcome of any enquiry or disciplinary procedure).

|  |  |
| --- | --- |
| Name and Address of Employer: |  |
| Job Title |  |
| Salary amount | **£** |
| Salary Scale / Point |  |
| Date Started |  |
| Date of leaving: (if applicable) |  |
| Main Duties | |
|  | |

|  |
| --- |
| **Qualifications Achieved from Secondary, Higher and/or Further Education** |

|  |  |  |
| --- | --- | --- |
| School/College/University attended | Qualifications  (include GCSE/O levels, A levels or equivalent, NVQ’s, work based courses and any further education) | Grade & Year taken  (if any) |
|  |  |  |
|  |  |  |

|  |
| --- |
| **Previous Employment:** |

You must explain any gaps in your job history. Please add additional lines or use a separate page if necessary.

**Please give details of all employment.**

|  |  |  |
| --- | --- | --- |
| Name and full address of Employer | Dates | Job Held |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
| **Membership of Professional Organisations and Institutions** |

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Date achieved | Membership status | By examination  (Yes/No) |
|  |  |  |  |

|  |
| --- |
| **Other Skills and Interests – including languages (spoken/written), computers, etc.** |

(Please include details of any public duties, community or voluntary work experience)

|  |
| --- |
|  |

|  |
| --- |
| **National Insurance Number/Work Permit** |

(You can obtain this information from the Department of Social Security)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| National Insurance Number |  | | | | |
| *If appointed, you will be required to produce documentary evidence of your National Insurance number before you take up the post. If you do not have this, you will be asked for alternative documentation to show that you are allowed to work in the UK.* | | | | | |
| Are there any restrictions to your residence in the UK which might affect your right to take up employment in the UK?. | **Yes** |  |  | **No** |  |
| If you were successful in your application, would you require a work permit prior to taking up employment? | **Yes** |  |  | **No** |  |

**DfES** Number (Teachers Only)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| DfES Number |  | | | | |
| Do you have Qualified Teacher Status? | **Yes** |  |  | **No** |  |

|  |
| --- |
| **Referees** |

Give details of two people to whom you are not related, nor people writing in the capacity of friends, to whom a request for a reference can be made; one should be your current employer, or if you are currently unemployed, your last employer. In the case of school / college / university leavers, your tutor. In certain circumstances a reference may be requested from any of your previous employers after obtaining your consent.

**Reference 1**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name (including title) |  | | | | |
| Relationship to you |  | | | | |
| Address: |  | | | | |
| Tel. No: |  | | | | |
| E-Mail address |  | | | | |
| May we contact prior to interview? | **Yes** |  |  | **No** |  |

**Reference 2**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name (including title) |  | | | | |
| Relationship to you |  | | | | |
| Address: |  | | | | |
| Tel. No: |  | | | | |
| E-Mail address |  | | | | |
| May we contact prior to interview? | **Yes** |  |  | **No** |  |

|  |
| --- |
| **Criminal Offences** |

* If the post you have applied for is exempt from the Rehabilitation of Offenders Act (ROA) 1974 (refer to job description), 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)
* The amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are ‘protected’ and are not subject to disclosure to employers and cannot be taken into account. Guidance and criteria on the filtering of these cautions and convictions can be found on the Disclosure and Barring Service website.
* Appointment to posts exempt from the ROA will be subject to the successful candidate obtaining an enhanced disclosure from the Disclosure and Barring Service. For all other posts, only unspent cautions or convictions need to be disclosed.
* Confirm you are not disqualified from work with children or subject to sanctions imposed by a regulatory body (e.g. Department for Education, Teaching Agency) or attach details of your record in a sealed envelope marked confidential’
* Providing false information is an offence and could result in the application being rejected or summary dismissal if the applicant has been selected and possible referral to the police.

Details of any relevant cautions or convictions:

|  |
| --- |
|  |

|  |
| --- |
| **Reason for Application** |

Please say why you would like this job.

Using the job description and person specification as a guide, please give details of any experience or skills which you feel demonstrate your suitability for this post. Please use a continuation sheet if you require.

|  |
| --- |
|  |

I understand that any employment, if offered, will be subject to the information on this form being correct. I can confirm that no valid information has been willfully withheld. I understand that providing misleading or false information will disqualify me from appointment OR if appointed may result in my dismissal without notice if the information on this form is later proved to be inaccurate. I declare that the information I have given in this application is accurate and true.

|  |  |  |  |
| --- | --- | --- | --- |
| Signed: |  | Date: |  |

If you are returning this application form by post, please sign and date. If returning by email you will be asked to sign a copy of this document before any offer of employment is made.

**Protecting your personal information**

I hereby give my consent for FSG to keep on file information (including equalities data) from this form and any attached documents. 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.

|  |  |  |  |
| --- | --- | --- | --- |
| Signed: |  | Date: |  |

|  |
| --- |
| Please return your completed application by email to [sbell@folkestonegirls.kent.sch.uk](mailto:sbell@folkestonegirls.kent.sch.uk) or by post to:  Contact: Mrs S Bell  Address: The Folkestone School for Girls, Coolinge Lane, Folkestone, Kent  Postcode: CT20 3RB  If returning this application electronically you are confirming that the information is true and accurate to the best of your knowledge. If you are successful for this post you will be required to sign your application prior to commencing employment. |

**Please ensure you complete the Equalities Monitoring Form**

|  |  |
| --- | --- |
| For Office Use Only: | |
| Application Number: |  |

|  |
| --- |
| **Equalities Monitoring Form** |

**This section of the application is CONFIDENTIAL and will be detached from your application. It is solely for monitoring purposes.**

The Folkestone School for Girls values diversity in its workforce and aims to recruit and value a workforce that reflects the diverse make-up of the community.

As part of our recruitment process you are required to complete this monitoring form. This page will be detached and will not form part of the selection process. We expect all our employees and prospective employees to support our aim to build a diverse and representative workforce

|  |
| --- |
| **Ethnic Origin** |

Please tick one box only, indicating the category that best describes your ethnic origin.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **White** | |  | **Black or Black British** | |
| British |  |  | Caribbean |  |
| Irish |  |  | African |  |
| Gypsy or Irish Traveler |  |  |  |  |
| Any other white background  (please specify) |  |  | Any other black background  (please specify) |  |
|  |  |  |  |  |
| **Mixed** | |  | **Asian or Asian British** | |
| White and Black Caribbean |  |  | Indian |  |
| White and Black African |  |  | Pakistani |  |
| White and Asian |  |  | Bangladeshi |  |
|  |  |  | Chinese |  |
| Any other mixed background  (please specify) |  |  | Any other Asian background  (please specify) |  |

|  |  |
| --- | --- |
| Other Ethnic Groups (please specify) |  |

**If you wish you may disclose information about yourself in this section about your:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Religion:** |  | **Sexual Orientation:** |  |

**Gender:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Male** |  | **Female** |  |

**Date of Birth**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Dd/mm/yyyy** |  | **Age Range** | **16-19** | **20-45** | **46-65** | **66+** |

|  |
| --- |
| **Disability Statement** |

The Folkestone School for Girls aims to be a fair employer and is committed to equality of opportunity for disabled people. Applications from disabled people are welcome. If you are offered an interview, we have a policy of providing appropriate access and equipment to ensure that disabled people are considered on an equal basis. If you would like any further assistance or advice about this application, we will try to help.

Please answer the following questions: Please delete:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Do you consider yourself disabled? | **Yes** |  |  | **No** |  |
| If YES, do you consider yourself to be disabled under the terms of the Disability Discrimination Act? | **Yes** |  |  | **No** |  |

The Disability Discrimination Act 1995 defines disability as **“a physical or mental impairment which has a substantial and long-term adverse effect on an individual’s ability to carry out normal day-to-day activities.”**

|  |  |
| --- | --- |
| Is there anything you would particularly like to tell us about your disability? |  |

Do you wish us to try to arrange for any of the following to be available, if you are called for interview?

Please tick or comment:

|  |  |
| --- | --- |
| Induction loop or other hearing enhancement |  |
| Sign language interpreter (please state type) |  |
| Keyboard for written tests |  |
| Someone with you at the interview (e.g. advocate or facilitator) |  |
| Assistance in and out of vehicle |  |
| Accessible car parking |  |
| Wheelchair access |  |
| Accessible toilet |  |

Other assistance (please specify):

|  |
| --- |
|  |

**The information you have given will be treated as confidential and is necessary to enable us to provide appropriate adjustments and facilities. Thank you for providing this information.**