

Granby Road, Stretford, Manchester

Tel: 0161 865 2293

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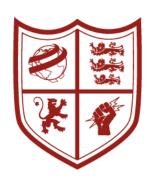
www.stretfordgrammar.com

Headteacher: Mr Michael Mullins

TEACHER APPLICATION FORM

Name:

Application for appointment to the Post of:



PLEASE COMPLETE IN BLACK INK

(and please maintain the format of the application form thank you)

	Surname:	Forename(s)	
	Previous Name (s) if applicable:	Dr. Prof. Other (please	
	Address:		
AL	E-mail:		Post Code:
PERSONAL	Mobile Tel. No: main no.	Home Tel. No	o: main no.
PE	Work Tel. No: main no.	Other Tel. No	o: main no.
	Date of birth:	National Insu	rance No:
	DfES Ref. No:	Date of recog	nition as qualified teacher:
	Will you need a work permit for this post?	yes 🗌 no 🗀	
T ENT	Name of Employer:		Full Time Part Time
CURRENT EMPLOYMEN ^T	Address:		Post Code:
CLEMP	Date of Appointment:	Post Title:	

Brief summary of main duties:			
Current Salary:		UPS / TLR Point / L	eadership Spine:
Age Range & Gender of Students:	Age Range taug	ht by you:	No. of students on roll:
Date of Leaving (if applicable)	:	Period of Notice:	
Reason for Leaving (if applicat	ole):		
Do you have any employment	which will contin	ue if you are appoint	ted? yes 🗌 no 🗌
Please provide details if yes:			

Please give information about education received in this country or abroad, qualifications obtained including degrees, with class and division, and Teaching Certificates, in chronological order starting with the most recent. Please include post-graduate and professional qualifications. Please note that you will be required to produce evidence of qualifications attained.

	Full name and address of establishment attended	Full or Part Time	Qualifications, date award made and Awarding Body, including grades at public examinations	Dates at Month/Y	
SNC				From	То
CATIC					
ALIFIG					
/nò c					
N ANE					
EDUCATION AND QUALIFICATIONS					
:DNC					

All previous teaching appointments should be in chronological order beginning with the first. Include any part-time work. All time since leaving full time education must be accounted for e.g. training, unemployment or time taken out of paid employment due to caring responsibilities. Please continue on a separate sheet if necessary. Period of Age Name of LEA **Service** School/College FT / PT **Position Held** No. on roll Range or **Employer** (month & year) taught From To Present or most recent employer **Previous Appointments**

PREVIOUS TEACHING EMPLOYMENT

ent/	Occupation/employment after	age 16 not stated els	ewhere on	this form (enter in date order)
Employment/ xperience	Name and address of employer (if appropriate)	Nature of Occupation	FT / PT	Dates (month & year) From To
Other Er Expe				
Q				

,	Government employer?	yes no
VTARY ,	If yes, did you receive any enhancement?	yes 🗌 no 🗌
VOLUI DANCY	If Yes, please give the name of the employer	
HEALTH AND REDUN	Please give details and a brief declaration about you which may prevent you from carrying out the duties	ur current state of health. Please mention anything s of this post.
I	If appointed you will be asked to declare your sickn	ess levels for the past 5 years.

Information requested und	ler the Rehabilitation of	Giffenders Act 1974	(Exceptions)	Order
1975				

Normally, under the above act, some criminal convictions do not have to be disclosed after a period of time they become 'spent'. This does NOT apply to posts which are involved with vulnerable groups (e.g. children, elderly people, etc.).

Due to the nature of the work for which you are applying, this post is made exempt from these rules by the above Order. This means that you MUST answer the following questions about current and ALL previous criminal convictions. Any information will be treated with the strictest confidence and you will be considered only in relation to this application. Disclosure of a criminal record will not exclude you from the appointment unless the School considers that the conviction renders you unsuitable.

Failure to disclose this information could lead to your application being rejected, or if you were appointed, to dismissal if it is subsequently learnt that you have a criminal conviction.

Please delete as necessary:-

1)	Have you ever I	been cautioned	, or convicted c	of any crimina	l offence?	yes ∐ no	ວ ∟_
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If Yes, please give details of the caution(s) or conviction(s) and date(s)

2)	Have you ever	been charged	with any offence	which has not yet	been brought to trial?	yes ∟] no [

If Yes, please give details of the charge and the date of the hearing (if known)

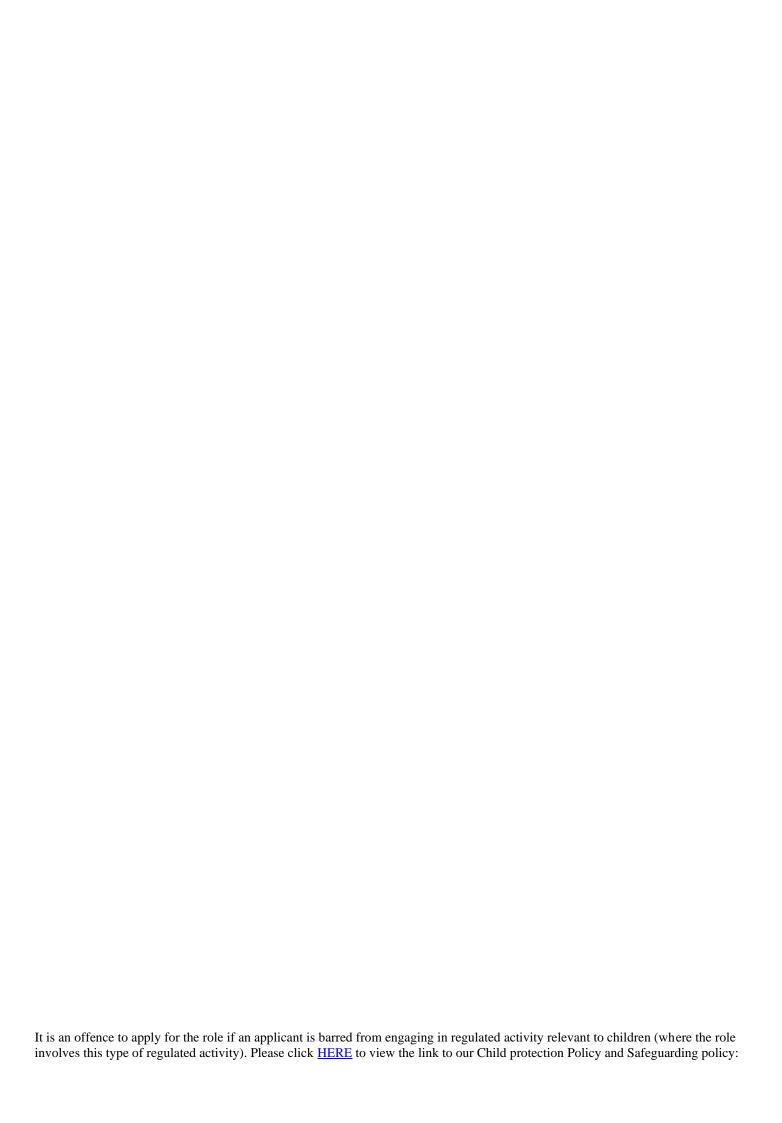
If you are ultimately offered the position we will carry out an independent check through the Disclosure and Barring Service.

I confirm that the information given above is correct and I understand that a failure to disclose any convictions may lead to my dismissal.

Signed

Date

DISCLOSURE OF CRIMINAL BACKGROUND



	referees, if required. One of these must be you	
	Referees should not be a relative or a member of Reference 1	of the Governing Body.
	Name:	Relationship to you:
	- 1 	,
	Job Title:	Company/Organisation:
	Address:	
	Post Code:	
CES	Telephone No.	E-mail:
KEFEKENCES	Can we take up a reference at this stage?	yes 🗌 no 🗌
Y U	Reference 2	
	Name:	Relationship to you:
	Job Title:	Company/Organisation:
	Address:	
	Post Code:	
	Telephone No:	E-mail:
	Can we take up a reference at this stage?	yes 🗌 no 🗌
ARRANGEMENTS	If you are a disabled person, are there any arran for interview and / or work-based exercise? If Yes, please specify (e.g. sign language interpretation)	ngements which we can make for you if you are called yes no no reter, audio tape, etc.)

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I confirm to the best of my knowledge that the information given on this form is accurate and that I have not omitted any facts which may have a bearing on my application for employment. (WARNING: any person appointed by the School having given false information will be liable to summary dismissal). *

Signature Date

If submitting electronically you will be asked to sign a copy of this form if you are invited to interview.

*Canvassing of Governors or employees of Stretford Grammar School, directly or indirectly, for any appointment will disqualify your application.

All information contained in this form will be treated as strictly confidential. By supplying information you will also be indicating your consent to the information being processed for all employment purposes as defined in the Data Protection Act 1998, and any verification checks which may be made. It will be copied for use during the recruitment process. Once the recruitment process is completed, the data will be stored for a maximum of six months, then destroyed. If you are a successful candidate, your application form will be used as part of your personnel record.