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Ironbridge Road, Madeley, Telford TF7 5HX Telephone: 01952 386000

TEACHING APPLICATION FORM

Please refer to the Guidance Notes before completing this form

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| **Post Title: Teacher of Health and Social Care**  at: Haberdashers’ Abraham Darby  Ironbridge Road, Madeley, Telford TF7 5HX | **Applications should be e-mailed and returned by 3.30pm on Wednesday 24th February 2021 to:**  Mrs D J Tudor – HR Manager  [deborah.tudor@taw.org.uk](mailto:deborah.tudor@taw.org.uk) |

1. PERSONAL DETAILS (BLOCK CAPITALS PLEASE)

|  |  |  |
| --- | --- | --- |
| Surname/ Family Name: | Forename or Initials: | Address for correspondence: |
| Middle Name Initials: | Title *(optional):* | Post Code: |
| Mobile Number: | | Email: |
| Home Telephone Number: | | DfE Teacher Number: |
| Type of Driving Licence Held: | | National Insurance Number: |
| Under the Equalities Act 2010, do you consider yourself to have a disability? **YES / NO**  If you are shortlisted for this post, you will be given the opportunity to tell us about any reasonable adjustments that need to be made during the recruitment process. This information should be provided separately from the application form. | | |

1. EDUCATION AND QUALIFICATIONS

|  |  |  |  |
| --- | --- | --- | --- |
| Name of School/College/University | Period of Study | Subject and type of qualification | Grade |
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| Other courses attended – please give details of any other relevant training undertaken, including short and in-service training, during the last 3 years. If necessary continue on separate sheet: |

1. PROFESSIONAL DEVELOPMENT/TRAINING

4a CURRENT OR MOST RECENT POST/EMPLOYMENT

|  |  |  |
| --- | --- | --- |
| Position /Job Title |  | |
| Name and address of employer |  | |
| Dates held | From: (month/year) To: (month/year) | |
| Reason for leaving (if applicable) |  | |
| Salary/Grade/Allowances |  | Number on Roll |
| Brief outline of any additional responsibilities held |  | |

4b PREVIOUS POSTS

|  |  |  |
| --- | --- | --- |
| Position / Job Title |  | |
| Name and address of employer |  | |
| Dates held | From: (month/year) …………………………..To: (month/year) | |
| Reason for leaving (if applicable) |  | |
| Salary/Grade/Allowances |  | Number on Roll |
| Brief outline of any additional responsibilities held |  | |

|  |  |  |
| --- | --- | --- |
| Position / Job Title |  | |
| Name and address of employer |  | |
| Dates held | From: (month/year) To: (month/year) | |
| Reason for leaving (if applicable) |  | |
| Salary/Grade/Allowances |  | Number on Roll |
| Brief outline of any additional responsibilities held |  | |

|  |  |  |
| --- | --- | --- |
| Position Held / Job Title |  | |
| Name and address of employer |  | |
| Dates held | From: (month/year) To: (month/year) | |
| Reason for leaving (if applicable) |  | |
| Salary/Allowances |  | Number on Roll |
| Brief outline of any additional responsibilities held |  | |

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| --- | --- | --- |
| Position Held / Job Title |  | |
| Name and address of employer |  | |
| Dates held | From: (month/year) To: (month/year) | |
| Reason for leaving (if applicable) |  | |
| Salary/Allowances |  | Number on Roll |
| Brief outline of any additional responsibilities held |  | |

Please continue on an additional sheet if necessary

5 supporting statement – please attach and number any additional sheets

Please provide any further information which you feel will be useful in support of your application, including a description of the duties and responsibilities of your current or most recent post. Include any other experience should you feel is relevant to your application. Take as a guide in completion of this section, the contents of the job description and person specification of the post for which you have applied. Please include details of your induction/probation, if appropriate, and if newly qualified, details of your teaching practice if you have not previously covered this. Please include the age range of pupils you have taught and number of pupils on roll at the schools where you have taught.

* **Please also attach a brief C.V to your application.**
* **Please attach a covering letter**, which should be word processed and no longer than two sides of A4, describing:

1. The skills and experience you would bring to this post
2. How you would contribute to raising achievement, and
3. The contribution you would want to make to the ‘wider life’ of Haberdashers’’ Abraham Darby.

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6 REFERENCES

Please give details of two referees whom we may ask about your suitability for the post. One of these should be your current or most recent employer. References will normally only be taken up if you are selected for interview. Referees must not be related to you. We reserve the right to approach your current and any previous employer.

|  |  |
| --- | --- |
| Name (including title):  Occupation / Job title:  Address:  Telephone Number:  Email Address: | Name (including title):  Occupation / job title:  Address:  Telephone Number:  Email Address: |

**I hereby give written permission that the named referees above can release a written and/or verbal reference.**

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

If these references ***cannot*** be taken without further authority from you please indicate why below:

|  |  |
| --- | --- |
| Reference 1 | Reference 2 |

7 OTHER INFORMATION

Are you, to your knowledge, related to any employee of Haberdashers’ Abraham Darby or Telford & Wrekin Council or to a member of the Haberdashers’ Adams’ Federation Trust Governing Body? **YES / NO**. If yes please give details below:

|  |  |
| --- | --- |
| Name: | Relationship: |

8 CRIMINAL CONVICTIONS

As this post involves working with children, young people and vulnerable groups, and is a position of trust, it is exempt from the provisions of the Rehabilitation of Offenders Act 1974. You must, therefore, disclose details of cautions, reprimands, final warnings and convictions, including ‘spent convictions’ no matter how long ago they occurred and regardless of whether the offences were committed as an adult or a juvenile.

We will only take this information into account if we consider them relevant to the post for which you have applied. Any failure to disclose such information could result in withdrawal of any job offer or disciplinary action by the organisation.

Successful applicants for this post will be subject to an enhanced check carried out through the Disclosure and Barring Service.

**Declaration:**

Have you at any time received, or do you have pending, a caution, reprimand, final warning or conviction? **YES / NO**

Has a Summary Award ever been made against you by a Commanding Officer of the Armed Forces? **YES / NO**

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| If you have answered YES to any of these questions please give full details below:  Date:  Nature of summons/ charge / caution/ allegation:  Court:  Sentence or order:  Additional details: |

9 YOUR SIGNATURE

I certify that to the best of my knowledge the details provided on this form and all other supporting papers are true and correct. Furthermore, I understand that the provision of false or misleading information given in response to any questions on this form or the failure to disclose information will result in the termination of any contract of employment entered into, or the withdrawal of any offer of employment. I also hereby give my explicit consent to the processing of data contained or referred to on this form, in accordance with the Data Protection Act and any subsequent legislation. I also confirm that I have read the Application Form Guidance Notes document before completing the application form.

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| **Signature of applicant:** | **Date:** |

HABERDASHERS’ ABRAHAM DARBY MONITORING FORM

In order to measure the effectiveness of our Employment Equality Charter we need to collect information on people who apply for our jobs. To enable us to do this, please fully complete the details below.

Some of the information you give on this form may be considered to be sensitive personal data under the Data Protection legislation and by completing and returning this monitoring form, you will be deemed to be giving your explicit consent to the processing of the data for Equality Monitoring. This information is separated on receipt of your application form and is not seen by anyone involved in the selection process.

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| **Please complete in BLOCK CAPITALS**  **POST APPLIED FOR:**  **SURNAME** **FORENAME:**  **MIDDLE NAME/S**…………… **PREVIOUS NAME/S**  **PREFERRED TITLE** (Mr/Miss/Mrs/Ms/Dr/Other): **DATE OF BIRTH**:  **Do you have any long standing illness or disability that limits your daily activity?**    YES NO Rather not say  **Are you caring for someone who has a long standing illness or disability that limits their daily activities?**  YES No Rather not say  **Do you belong to any particular religion or hold particular beliefs*?*** *(Please tick* **✓)**  Christian Hindu Muslim Sikh Other (please state) …………………… No religion  Rather not say  **PLEASE TICK RELEVANT BOX**  **AGE:** 16-18 19-35 36-49 50-59 60-65 over 65 .  **GENDER**: Male Female  **WHAT IS YOUR ETHNICITY? (please tick ✓)**   |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **White** | | **Mixed/multiple ethnic groups** | | **Asian/Asian British** | | **Black/African/ Caribbean/Black British** | | **Other ethnic group** | | | English/Welsh/ Scottish/ Northern Irish/ British |  | White and Black Caribbean |  | Indian |  | African, please write country of origin |  | Arab, please write country of origin: |  | | Irish |  | White and Black African |  | Pakistani |  | Caribbean |  | Chinese |  | | Gypsy or Traveller |  | White and Asian |  | Bangladeshi |  | Any other Black/ African/Caribbean/ Black British  background,  please write in: |  | Any other ethnic group, please write in: |  | | Polish |  | Any other mixed/multiple ethnic background, please write in: |  | Any other  Asian background please write in: |  | | Any other white background,  please write in: |  |   **ARE YOU AN AGENCY WORKER? (please tick✓)** Yes No  **HOW DID YOU FIND OUT ABOUT THIS VACANCY?**  **ARE YOU CURRENTLY EMPLOYED BY THE HABERDASHERS’ ADAMS’ FEDERATION** Yes No  **OR TELFORD AND WREKIN COUNCIL**  If yes, please enter your employee number: |