

Teacher Application Form

If you need a copy of this information in large print,
Braille, another language or on USB stick, please ask us.

Application for
the Post of:

Academy Name:

If you are a current employee are you applying for this post, please **do not** complete this form and **ONLY** complete an internal application form

Do you have the right to work in the UK?

Yes ☐

No ☐

Are there any restrictions on your employment in the UK?

Yes ☐

No ☐

If yes, please provide details:

Personal Information

Previous Name(s): (if applicable)

Last Name:

First Name(s):

Home Address:

Please specify alternative
correspondence address on a
separate sheet.

Postcode:

E-mail address:

National Insurance No (If you have one):

Date of Birth:

Do you have a full current
driving licence?

Yes ☐

No ☐

Home Telephone
Number:

Do you have daily use of a
vehicle?

Yes ☐

No ☐

Work Telephone
Number:

Do you have any penalty points
on your licence?

Yes ☐

No ☐

If so, how many?

Mobile Telephone
Number:

Do you consider yourself to have a disability?

Yes ☐

No ☐

(NB: The Equality Act defines a person as having a disability if he/she "has a physical or mental impairment which has a substantial and long-term adverse effect on his or her ability to carry out normal day to day activities")

The Shaw Education Trust operates an 'Interview Guarantee Scheme' for people with a disability and who meet the essential criteria of the post.

If you have a disability, are there any arrangements which we can make for you
if you are called for interview?

Yes ☐

No ☐

If yes, please outline your requirements:

How did you find out about this job?

Are you applying on a Job Share basis?

Yes ☐

No ☐

If so, please state the proportion of full-time you are willing to work:

a) Date of gaining Qualified Teacher Status:

b) DfES reference number:

c) If you qualified after 7th May 1999, have you completed your induction year?

Yes ☐

No ☐

If yes, give date

d) Have you passed your skills tests?
(Trainees only)

Numeracy

☐

Literacy

☐

ICT

☐

If not, when do you expect to complete them?

Successful applicants will be required to provide evidence of their registration with the Teaching Agency.

3. Previous Teaching Experience

Please list most recent first

Please include all teaching history. (Include information such as: % of time teaching, ability levels, subjects taught etc.) If newly qualified please give information of teaching practices in "Details of the Post:"

A. Current Position

School name:			
Address & Telephone Number:			
Local Authority:			
Post Title:			
Grade/Scale: (Please specify salary point)		Allowances: (Please specify)	
Upper pay spine:(If applicable)	What date did you pass the threshold?	What date did you progress to -	UPS 2: Date
			UPS 3: Date
Approximate number on roll:		Age range taught:	
Dates: From - To:		Subject/ Specialisms:	
Reason For Leaving			

Details of Post
(Please include any
management
allowances held)

3. Previous Teaching Experience Continued

B.

School name:			
Local Authority:		Post title:	
Approximate number on roll:		Age range taught:	
Dates: From - To:		Subject/ Specialisms:	
Reason For Leaving			
Details of Post: (Please include any management allowances held)			

C.

School name:			
Local Authority:		Post title:	
Approximate number on roll:		Age range taught:	
Dates: From - To:		Subject/ Specialisms:	
Reason For Leaving			
Details of Post: (Please include any management allowances held)			

D.

School name:			
Local Authority:		Post title:	
Approximate number on roll:		Age range taught:	
Dates: From - To:		Subject/ Specialisms:	
Reason For Leaving			
Details of Post: <i>(Please include any management allowances held)</i>			

4. Employment Outside Teaching

(Please include all employment history since leaving secondary education, if not included in teaching experience)

Employer & Address:	Job Title & Main Duties:	Full or Part Time	Dates:	
			From:	To:
A.				
B.				
C.				
D.				

5. Other Relevant Experience

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6. Education

Please give details of all nationally recognised qualifications awarded/results awaited; **from GCE Advanced Level to Further Degree Level** or their equivalents in chronological order.

Attended		Name of School/College:	Qualification:	Subject:	F/T or P/T:	Grade/Level:	Date Gained:
From	To						

Attended		Name of School/College:	Qualification:	Subject:	F/T or P/T:	Grade/Level:	Date Gained:
From	To						

Copies of **essential qualifications** will be required on appointment.

7. Other Continuing Professional Development

Please list in chronological order, most recent first, any relevant courses or training you have attended in the last five years indicating the date of attendance. (Please continue on a separate sheet if necessary.)

If applying for a headship, please include details regarding NPQH

[illegible]

8. Supporting Statement for Position

Please give any details you wish in support of your application, in particular any experience, skills, knowledge, training and qualifications relevant to the post applied for as detailed in the information sent to you. (Please continue on a separate sheet if necessary, no more than 2 sides of A4 to support your application).

10. Asylum and Immigration Act 1996

The successful applicant will be required to provide original material evidence of a National Insurance Number or other approved documentation before being allowed to commence employment. Can you provide evidence?

Yes ☐ No ☐

11. Health Requirements

Appointment is subject to a satisfactory medical report from our Medical Adviser which will be obtained if you have indicated any medical disabilities.

12. SAFEGUARDING

[Safeguarding and Pupil Protection Policy 2021-22.pdf \(shaw-education.org.uk\)](https://www.shaw-education.org.uk/Safeguarding%20and%20Pupil%20Protection%20Policy%202021-22.pdf)

References

One reference should relate, if applicable to your present job, or most recent employer, or a member of the School/University Academic Staff. Please state in what capacity the two referees are acting, e.g. current employer. Please include name, address, telephone number and e-mail address. If you have recently left full-time education, please ensure you include a Head Teacher/College/University Principal (or their representative) as one of your references.

1st Referee

Name:

Position Held:

Organisation:

Capacity in which you know the referee:

E-Mail Address:

Address:

Telephone No:

Have you approached your reference to confirm they are happy to complete this for you?

Yes

☐

No

☐

Please indicate here if you are happy for this referee to be contacted at this stage

Yes

☐

No

☐

2nd Referee

Name:

Position Held:

Organisation:

Capacity in which you know the referee:

E-Mail Address:

Address:

Telephone No:

Have you approached your reference to confirm they are happy to complete this for you?

Yes

☐

No

☐

Please indicate here if you are happy for this referee to be contacted at this stage

Yes

☐

No

☐

Please note that, in any case, references will be taken up before a firm offer of appointment is made.

14. General Application Information

Tick which phases you are trained to teach:

Early Years ☐

Key Stage 1 ☐

Key Stage 2 ☐

Key Stage 3 ☐

Key Stage 4 ☐

Post 16 ☐

Special (Specify which key stage)

Main curriculum area:
(If applicable)

Subsidiary curriculum area:
(If applicable)

Other relevant areas of interest:
(If applicable)

Declarations

To your knowledge are you related to a member of staff, governor of the school or anyone elected to or employed by The Shaw Education Trust?

Yes ☐

No ☐

If 'Yes', please state their name and position held:

SEE SUPPORT FORM

The information given in this form will form part of The Contract of Employment for successful candidates. Under the terms of The Data Protection Act 2018 the information you give us will be kept confidential and will only be used for the purpose of personnel management. We may contact other relevant organisations to check factual information you have given details of in this application form. The information will be stored manually and / or electronically and if unsuccessful your application will be disposed of after 6 months.

I declare that all the information I have provided is true, that I have not canvassed a member/officer of the Trust, directly or indirectly, in connection with this application and further, that I will not do so. I understand that such canvassing will disqualify me as a candidate. I further understand that failure to disclose any relationship with a member/officer of the Trust or providing information which is untrue or omitting information relevant to the application, will also disqualify me and that if such failure/untrue information is discovered after appointment I may be liable to dismissal without notice. I agree that the information I give you in connection with this application for employment may be stored and processed for the purpose of personnel management.

Signed:

X

Date:



Please remember to complete and return the recruitment monitoring form as part of your application.

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