

Bridgnorth Endowed School Application Form TEACHING

CONFIDENTIAL

Office Only

| Candidate's Name: | |
|-------------------|--|
| Post Applied For: | |

Thank you for your interest in applying for a post at Bridgnorth Endowed School. Please complete this form and email it to KBywater@bridgnorthendowed.co.uk

| 1. Personal Details | | | | | | |
|---|---|----------------------|-------------------|--------------------------------|------------|----------------|
| Surname: | | Preferred Title: | | | | |
| First Names: | | | | Previous Names: | | |
| Address: | | | | | | |
| | | | | | | |
| Postcode: | | | | Date of Birth: (DD/MM/YY): | | |
| Mobile Number: | | | | Home Phone Number: | | |
| Email: | | | | | | |
| DfES Reference No: | | | | National Insurance No: | | |
| Asylum & Immigration Are you a UK/EU/EEA (If your application is su | Citize | en? YES | NO o provide e | vidence of your entitlement to | live and w | ork in the UK. |
| | | | | | | |
| 2. Teaching Education | on, C | Qualifications and T | raining | | | |
| Name of teacher traini | ing ir | nstitution: | | | | |
| Have you successfully teacher in this country | | | - | | YES | NO |
| If yes, please give date | of c | ompletion: | | | | |
| From (month/year) | То | (month/year) | Qualificati | ion obtained | | |
| | | | | | | |
| Subjects, main and subsidiary: | | | | | | |
| Age range of students | Age range of students Other special interests, including languages spoken | | | | | |
| | | | | | | |
| Superannuation Scheme | | | | | | |
| Do you contribute to the Teacher's Superannuation Scheme? YES NO | | | | | | |
| If you contribute to another scheme, please give details: | | | | | | |
| Have you elected to pay Superannuation contributions for part-time teaching? YES NO | | | | | | |

| 3. Education, Qualifications and Training | | | | |
|---|--------------|------------------|---------------|--|
| Name of School/College/University | From - To | Qualifications | Date obtained | |
| attended (after age 11) | (Month/Year) | including grades | (Month /Year) | |
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| 4. In-Service Training and Development | | | | |
|--|---|---------------------------|---------------------------------|--|
| Give details of releva | nt courses and training undertake | n in the last five years. | | |
| Dates and duration | Title of course/training (including home study and distance learning) | Name of provider | Qualification obtained (if any) | |
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| 5. Membership of Professional Bodies | | | | |
|--------------------------------------|-------------------|--------|--------------|--|
| Date | Professional Body | Number | Grade/ Level | |
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6. Career History

Please give details of all full and part-time work including all paid and unpaid employment or experience after the age of 18, e.g. commercial experience, raising family, youth work and voluntary work. Complete the columns working backwards from present date. Please do not leave any gaps – detail the reasons for the gaps on the form below.

| Dates | | Employer Name and Address | Age | Approx. | Salary Scale | Full time/ | Reason for |
|------------|------------|---------------------------|-------|---------|----------------|-------------|------------|
| | | Type of business/activity | Range | School | (include | part time | leaving / |
| From | То | | | Roll | responsibility | (State | Amount of |
| (mm/yy) | (mm/yy) | | | | points) | proportion) | notice |
| (, / / / / | (, / / / / | | | | | , , | required |
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Continue on a separate sheet if necessary. Please put your full name on additional sheets.

| 7. Application Statement | | |
|--|--|--|
| Please give any information which you think will help us consider your application, including details of your present or most recent job, or other relevant experience and any specialised knowledge you have. You should try to relate your information to the job description and person specification for the post to which you are applying. | | |
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| Continue on a separate sheet if necessary. Please put your full name on additional sheets. | | |

| 8. Driving | | |
|---|----------|-----|
| Please complete this section if the person specification for the post includes these re | equireme | nts |
| Do you have a valid driving licence? | YES | NO |
| If YES, type of licence | | |
| Do you have access to a vehicle which you are able to use for work purposes? | YES | NO |

| 9. 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. | | | |
| Reference 1 Name: | | | |
| Email: | Tel: | | |
| Occupation: | Relationship to Candidate: | | |
| Reference 2 Name: | | | |
| Email: | Tel: | | |
| Occupation: Relationship to Candidate: | | | |
| NOTE: Unless you specify otherwise, we will not consult you prior to approaching these referees. | | | |
| We will not confirm an offer of appointment until we have received two references that are satisfactory in our | | | |

10. Rehabilitation of Offenders Act 1974

Bridgnorth Endowed School is committed to safeguarding and promoting the welfare of children and young people and expects all staff to share that commitment.

All applicants who are offered employment will be subject to an Enhanced Disclosure check from the Disclosure and Barring Service before their appointment is confirmed.

Criminal Convictions

The amendments to the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (2013 and 2020) provides that when applying for certain jobs and activities, certain convictions and cautions are considered 'protected'. This means that they do not need to be disclosed to employers, and if they are disclosed, employers cannot take them into account.

Should you be shortlisted for interview you will be asked to declare on a separate form whether you have any convictions or cautions that are not "protected" in line with this legislation. Further information on the filtering of these cautions and convictions can be found in the <u>DBS filtering guide</u>."

FOR COMPLETITION BY THE APPOINTING OFFICER

I confirm that, if shortlisted, a Disclosure form will be sent to the applicant

Signed: Position held: Date:

| 11. Relationship to Members or Employees | | | | |
|---|---------------|--|--|--|
| Please give the details of any governor or employee of the school. Canvassing will disqualify a candidate from appointment. | | | | |
| Name: | Relationship: | | | |

12. Data Protection Act

The information or data which you have supplied on this form will be processed and held on computer and hard copy (this will be destroyed if unsuccessful) and will also be processed and held on your personal records if you are appointed.

The data may be processed by the school for the purposes of equality monitoring, compiling statistics and for the keeping of other employment records, government or other returns.

By signing and returning this application form you will be deemed to be giving your explicit consent to processing of data contained or referred to on it, including any information which may be considered to be sensitive personal data.

13. 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 if I have provided false or misleading information in response to any questions on this form or have failed to disclose information that I should disclose, this 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 1998 and any subsequent legislation.

| Signature of Applicant: | Date: |
|-------------------------|-------|
|-------------------------|-------|

NOTE: If an application is made online, you will be asked to sign this form if invited to interview.

EQUAL OPPORTUNITY MONITORING FORM

This sheet will be detached from your application form and will not be seen by anyone involved in the selection process. We will use this information for monitoring our recruitment processes and, if you are appointed, for our personnel/payroll records. Please complete in block capitals or by ticking the relevant box

| Vacancy Information | | | |
|---|----------------------|---------------------|--|
| Job title: | | | |
| Closing Date: | | | |
| Where did you see the advertisement | for this position? | | |
| | | | |
| Personal Information | | | |
| Name: | | Date of birth: | |
| Gender: MALE | FEMALE | | |
| | | | |
| Ethnic Origin | | | |
| Please select the box which most close | ely describes your c | ultural background. | |
| White British White Irish White Other Caribbean White Other African Black Other Black other White and Black Caribbean White and Black African Pakistani Bangladeshi Asian other Chinese | | | |
| Other ethnic group (please specify): | | | |
| | | | |

| Disability | | |
|---|-----|----|
| Do you have a disability in respect of employment in this post? | YES | NO |
| If you are selected for interview, are there any special arrangements we would need to make for you? | YES | NO |
| If YES and you are successful in obtaining an interview, we will contact you after the shortlist has been drawn up to discuss arrangements. | | |