

PLEASE PRINT CLEARLY IN BLACK INK

POSITION APPLIED FOR:	
AS ADVERTISED IN:	

1. PERSONAL DETAILS	
Surname*: Previous Surname:	First Name*:
Address for correspondence*:	Home telephone number: Mobile telephone number*: E-mail address*:
DfE Number*:	Membership of professional body:
NI Number*:	If you are not a UK national, do you have a valid work permit? * Yes/No

* must be completed

2. EDUCATIONAL QUALIFICATIONS				
Please give details of your education, listing secondary schools, colleges and universities attended. Evidence of qualifications will be required (continue on a separate sheet if necessary)				
General Education		School, College or University	Examinations taken or to be taken (with dates)	Qualifications obtained (include grade and/or class of degree)
From	To			

3. TEACHING QUALIFICATIONS			
Examining Body/Institution	Qualification Awarded	Grade/Level Awarded	Date Awarded

4. CONTINUING PROFESSIONAL DEVELOPMENT	
Please give details of relevant courses attended or professional training received in the last three years	
Course	Date

5. EMPLOYMENT HISTORY

Current Employment

Name and address of current employer:

Position Held	Start Date	Length of notice required	Current Salary	Reason for Leaving

Please give brief description of your duties and responsibilities

Previous Employment (continue on a separate sheet if necessary)

Date From/To	Organisation	Position	Reason for Leaving

6. REFERENCES

Please provide details of two referees who can be contacted to support your application. The first referee should be your current (or most recent) employer. If your most recent employment does not involve working with children or young people, you should also give your most recent employer, who can provide information on your work with children or young people. References will not be accepted from relatives or from people writing solely in the capacity of friends.

Referee 1	Referee 2
Name:	Name:
Position:	Position:
Address:	Address:
Tel:	Tel:
Email:	Email:
Please state whether we are able to take up this reference prior to interview:	Please state whether we are able to take up this reference prior to interview:
Yes/No	Yes/No

7. SUPPORTING STATEMENT

Please outline how your education, skills and experiences will contribute to you successfully undertaking this post. Please include information about your personal drive, mission and ethos (continue on a separate sheet if necessary)

Please tick this box if you consider yourself to have a disability and wish to be considered under the Disability Confident Scheme. This scheme guarantees candidates with a disability, who meet all the essential role criteria, an interview.

Signed: _____ Date: _____

FOR TEACHING POSTS ONLY

Please complete the table below with the results of your students for the last three years and bring it to interview

NEWLY QUALIFIED TEACHERS should provide a copy of the report from their teaching placement in place of this information.

Year	Level/ Syllabus	Group Size	A/Distinction	B/Merit	C/Pass	D	E	Comments on general ability of the group/value added information

I certify that the information contained in this form is a correct record and understand that falsification of any details would lead to my application/ appointment being revoked. I give my permission to any information contained herein, together with supplementary documentation provided by me as part of my application, being processed in accordance with the data protection regulations currently in force.

Signature: _____

Date: _____

For office use only – Online Recruitment Checks

Date Check Completed	Name of Checker

DECLARATION

Upon receipt, this part of the form will be separated from your application before short listing takes place.

8. POLICY ON THE EMPLOYMENT OF PEOPLE WITH A CRIMINAL RECORD				
REHABILITATION OF OFFENDERS ACT 1974				
The nature of the post means that you are exempt from Section 4(2) of the rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. Please tick appropriate boxes:				
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)?	Yes		No	
Have you ever been convicted of any offence in a Court of Law or received any bind-overs or cautions from the police?	Yes		No	
Have you ever been included on the DfES List 99 or Teacher Services Restrictions List?	Yes		No	
Have you ever been disqualified from working with children?	Yes		No	
Have you ever been or are currently subject to sanctions imposed by a Regulatory body, e.g. The General Teaching Council?	Yes		No	
If you have answered Yes to any of the above questions, please give brief details and dates of any offences below (or if insufficient space continue on a separate sheet of paper)				
9. EMPLOYMENT DECLARATION				
Have you left any previous job for the reason of early retirement/voluntary redundancy? If yes, please provide details	Yes/No			
Have you ever been dismissed from any previous employment on the grounds of misconduct or incapability? If yes, please give details	Yes/No			
Have you ever worked for or applied to The County High School, Leftwich before? If yes, please provide details including positions applied for and dates	Yes/No			
Do you know any member of the School’s Governing Body or a member of staff? If yes, please state name(s)	Yes/No			
Canvassing by or on behalf of applicants will lead to immediate disqualification				
10. DECLARATION				
I certify that to the best of my knowledge the information given in this application is factually correct and I understand that discovery of any false information may, in the event of my employment, result in dismissal or disciplinary action by the School. I understand that should my employment begin before my references and police clearance have been received and these prove to be unsatisfactory, my engagement may be ended without prior notice.				
Name:				
Signed:	Date:			

EQUAL OPPORTUNITIES MONITORING

Please fill in the details required and/or tick the appropriate boxes

POSITION APPLIED FOR:	
AS ADVERTISED IN:	

Gender			
(If you are undergoing gender reassignment, use the gender identity you intend to acquire)			
Male		Female	
Prefer not to say		Intersex/Other	

Age	Date of Birth

Disability			
Do you consider that you have a disability as defined by the Equality Act?			
Yes		No	
Prefer not to say			

Ethnicity			
would you describe your nationality and ethnicity?			
White			Chinese or Other Ethnic Group
White – British		Black African	Chinese
White – Irish		Black Caribbean	Other Ethnic Group
Other White		Other Black	
Mixed		Asian or Asian British	
White and Asian		Bangladeshi	
White and Black African		Indian	
White and Black Caribbean		Pakistani	
Other Mixed		Other Asian	
			Prefer not to say

Religion			
How would you describe your religion or other strongly held belief?			
I would describe my religion or belief as _____			
I have no particular religion or belief		Prefer not to say	

Sexual Orientation			
would you describe your sexual orientation?			
Heterosexual		Gay Man	Prefer not to say
Bisexual		Gay Woman/ Lesbian	Other _____

Marriage or Civil Partnership			
How would you describe your marital status?			
Single		Civil Partnership	
Married		Prefer not to say	