****

 **Job Application Form**

**Merit Pupil Referral Unit**

**Willeton Street,**

**Bucknall,**

**Stoke-on-Trent**

**ST2 9JA**

 **Telephone Number:** 01782 928983

 **E-mail:** swhiteley4@meritpru-stoke.org.uk

**Section A**

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| 1. Vacancy Details |

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| Vacancy ID |       | Applicant ID (for office use only) |       |
| Directorate / School |       |
| Job Title |       | Closing Date |       |

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| 2. Source |
| [ ]  www.stoke.gov.uk | [ ]  www.gov.uk/jobsearch [ ]  www.wmjobs.co.uk | [ ]  Newspaper (Please specify:      ) |  |
| [ ]  Professional Journal (Please specify:       ) | [ ]  Social Media (Please specify:       ) |  | [ ]  Other (Please specify:      ) |

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| 3. Personal Details |

|  |  |
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| Title  | [ ]  Mr [ ]  Mrs [ ]  Miss [ ]  Ms [ ]  Dr  |
| First Name(s) |       | Surname |       |
| Address  |       |
| Post Code  |       | Email Address \* |       |
| Tel No. Home  |       | Tel No. Mobile |       |
| Date of Birth |       | National Insurance No. |       |

\*Please note any communication regarding the selection process will be sent to the email address provided. If you are appointed to this role, this email address may also be used to send you further contractual documents and notifications.

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| Do you have full clean driving licence? | [ ]  Yes [ ]  No | Do you have the ability to travel? | [ ]  Yes [ ]  No |

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| 4. Right to Work in the UK (Asylum and Immigration Act 1996) |
| If appointed you will be required to provide proof of current and valid permission to be in the United Kingdom and to do the type of work offered. A list of valid documents are available at [www.bia.homeoffice.gov.uk](http://www.bia.homeoffice.gov.uk) |
| Are you able to provide the documents required? [ ]  Yes [ ]  No  |  |

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| 5. Rehabilitation of Offenders Act 1974 |
| The Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013) provide that certain spent convictions and cautions are ‘protected’ and are not subject to disclosure to employers and cannot be taken into account. Please read the following guidance before completing the question below (<https://www.gov.uk/government/publications/dbs-filtering-guidance>)Do you have any convictions, cautions, reprimands or final warnings that are not ‘protected’? [ ]  Yes [ ]  No If YES, please provide full details below including the date and nature of the offence:      All posts involving direct contact with children and vulnerable adults are exempt from the Rehabilitation of Offenders Act. For these positions the City Council will check with the DBS to see if you have any criminal convictions. Are you registered with the DBS Update Service? [ ]  Yes [ ]  No Any information will be treated as confidential. You should note that disclosing a conviction does not automatically bar you from appointment. Failure to disclosure may result in withdrawal of any job offer in relation to this form. |

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| 6. References |
| Please give the name and address of two people, one of whom must be your present employer (or if unemployed, your last employer) to whom reference can be made. If this is your first employment, please use your school / college |

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| **1.Present / Last Employer:** |
| Name |       | Title / Position |       |
| Address  |       |
| Post Code  |       | Email Address |       |
| Tel No.  |       | Tel No. Mobile |       |
| Are you happy for this referee to be contacted prior to appointment? | [ ]  Yes [ ]  No |
| **2.** |
| Name |       | Title/Position |       |
| Address  |       |
| Post Code  |       | Email Address |       |
| Tel No.  |       | Tel No. Mobile |       |
| Are you happy for this referee to be contacted prior to appointment? | [ ]  Yes [ ]  No |

**Please note – in the interest of safeguarding if your post requires you to work with children we will contact your referees prior to an interview. For all other post references will be sought on appointment**

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| 7. Declaration |
| I declare that all the information I have provided is true, and I have not canvassed a member / officer of the council directly or indirectly, in connection with this application and further to that will not do so. |

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| --- | --- | --- | --- |
| Signature |       | Date |       |
| To your knowledge are you related to any members / employees of the City Council? Yes [ ]  No [ ]  If YES, please specify who:      |

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| 8. Equality and Diversity - For monitoring purposes only |
| Gender | [ ]  Female [ ]  Male [ ]  Prefer not to say Applicants should answer this question according to their current gender presentation, which may be different to that assigned at birth |
| Marital Status | [ ]  Single [ ]  Married [ ]  Civil Partner [ ]  Widowed [ ]  Divorced [ ]  Dissolved [ ]  Separated [ ]  Prefer not to say  |
| Sexual Orientation | [ ]  Opposite Sex (Heterosexual) [ ]  Opposite and Same Sex (Bisexual) [ ]  Same Sex (Lesbian / Gay) [ ]  Prefer not to say  |
| Disability | Do you consider yourself to be disabled under the Equality Act 2010?[ ]  Yes [ ]  No [ ]  Prefer not to say  |
| Ethnic Origin |

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| --- | --- | --- |
| **White**[ ]  British [ ]  Irish [ ]  Irish Traveller [ ]  Gypsy / Roma [ ]  Other White  | **Mixed**[ ]  White / Asian [ ]  White / Black African [ ]  White / Black Caribbean [ ]  Other/ Mixed  | **Asian / Asian British**[ ]  Pakistani[ ]  Indian[ ]  Bangladeshi [ ]  Other Asian  |
| **Black / Black British** [ ]  African[ ]  Caribbean [ ]  Other Black [ ]  Other Please state:[ ]  Prefer not to say  | **Chinese / Other Ethnic**[ ] Chinese [ ] Other       |  |

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| Religion / Belief | I would describe my religion and belief as:      [ ]  No Religious Belief [ ]  Prefer not to say |

**Section B**

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| Vacancy Details - For Office Use Only  |

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| Vacancy ID |       | Applicant ID |       |
| Job Title |       | Directorate / School |       |

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| 9. Education Secondary, Further (continue on a separate sheet if required)  |
| Name of School / College / University  | Qualification  | Subject | Grade  |
|       |       |       |       |
|       |       |       |       |
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| Professional Qualification/ Membership of Professional Bodies inc DfES/GTC |
| Name of Professional Body/Association  | Current Level of Membership  | Method of Achievement (eg. Application; examination; invitation) | Membership number  |
|       |       |       |       |
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| 10. Training and Development (continue on a separate sheet if required) |
| Training  | **Date Completed**  | **Training**  | **Date Completed**  |
|       |       |       |       |
|       |       |       |       |
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| 11. Supporting Information (continue on a separate sheet if required) |
| Please tell us why you are suitable for the job. You will need to address and provide examples of all points marked on the person specification. It is advisable to take each point in turn and demonstrate / evidence how you meet this. This is important, as you will be shortlisted against this criteria. |
|  |

Previous employers may be

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| 12. Current / Last Employment \* Previous employers may be contacted to validate information provided. |

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| --- | --- |
| Name of Employer |       |
| Address |       |
| Post Code |       | Tel No |       |
| Job Title |       | Salary |       |
| Date: From |       | Date: To |       |
| Brief Description of your Current / Last Job |
|       |
| Reason for leaving /wanting to leave |       | Notice Period |       |

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| 13. Previous Employment - at least five years history must be provided. \* Start with the most recent (continue on a separate sheet if required)  |

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| Name of Employer  |       |
| Address |       |
| Postcode |       | Tel No. |       |
| Job Title |       | Salary |       |
| Date: From |       | Date: To |       |
| Brief Description of your role |
|       |
| Reason for leaving  |       |

|  |  |
| --- | --- |
| Name of Employer  |       |
| Address |       |
| Postcode |       | Tel No. |       |
| Job Title |       | Salary |       |
| Date: From |       | Date: To |       |
| Brief Description of your role |
|       |
| Reason for leaving  |       |

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| --- | --- |
| Name of Employer  |       |
| Address |       |
| Postcode |       | Tel No. |       |
| Job Title |       | Salary |       |
| Date: From |       | Date: To |       |
| Brief Description of your role |
|       |
| Reason for leaving  |       |

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| --- | --- |
| Name of Employer  |       |
| Address |       |
| Postcode |       | Tel No. |       |
| Job Title |       | Salary |       |
| Date: From |       | Date: To |       |
| Brief Description of your role |
|       |
| Reason for leaving  |       |

**On appointment if the post, requires you to work with vulnerable adults or children your employment history will be verified**

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| If you have any gaps in your employment or education, please explain them here (continue on a separate sheet if required) |
|       |

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| Please detail below any dates when you would not be able to attend an interview. Every effort will be made to avoid these dates but this may not always be possible. |
|       |

Thank you for taking the time to complete this application form.

If you have not received any further communication within 8 weeks of the closing date, you should assume that on this occasion your application has been unsuccessful.

****If you required the application form in an alternative format, please contact us.

**www.stoke.gov.uk/jobs**