

Greywood

Candidate Ref

**Multi-Schools Trust**

The House, Eastern Avenue, Lichfield,

Staffordshire, WS13 7EW

**APPLICATION FORM**

If you need a copy of this form in large print, Braille, another language, or in audio format, please contact us to advise.

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| School Name: |  |

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| Application for the Post of: |  | Job Ref number: |  |

**Personal Information**

|  |  |  |  |
| --- | --- | --- | --- |
| First Name(s): |  | Last Name: |  |
| Previous Name(s):(if applicable) |  |  |  |
| National Insurance Number: |  |
| Address: |  |
| Email address: |  | Home Telephone Number: |  |
| Mobile Telephone Number: |  | Work Telephone Number: |  |

\*To be completed if the job requires driving or requires you to be mobile across sites/geographical area.

|  |  |
| --- | --- |
| Do you have a full current driving licence? |  Yes [ ]  No [ ]  |
| Do you have daily use of a vehicle? |  Yes [ ]  No [ ]  |
| Do you have any penalty points on your licence? |  Yes [ ]  No [ ]  |
| If yes, please further information(specify the number of points, reason, and date issued) |  |

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| The organisation welcomes applications from disabled people. Do you require any adjustments because of a disability to participate in the selection and interview process?  |
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| 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: |  |

**Employment History**

**Present or Most Recent Employment**

|  |  |  |
| --- | --- | --- |
| Job Title: |  |  |
| Start Date: |  | End date:(if applicable) |  |
| Employer’s name, address and telephone number: |  |
| Grade/Salary: |  | Allowances:(please specify) |  |
| Notice required: |  | Reason for leaving: |  |

Please provide a brief description of the duties and achievements of the post:

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| Employment History |
| Provide details of your employment history, starting with your most recent / current employer and working back. Please account for any gaps. Continue on a separate sheet if necessary. |
| Employer |  |
| Job Title |  |
| Start Date (dd/mm/yy) |  | End Date (dd/mm/yy) |  |
| Reason for Leaving |  |
| Address of employer / brief details of duties and responsibilities  |  |
| Employer |  |
| Job Title |  |
| Start Date (dd/mm/yy) |  | End Date (dd/mm/yy) |  |
| Reason for Leaving |  |
| Address of employer / brief details of duties and responsibilities  |  |
| Employer |  |
| Job Title |  |
| Start Date (dd/mm/yy) |  | End Date (dd/mm/yy) |  |
| Reason for Leaving |  |
| Address of employer / brief details of duties and responsibilities  |  |
| Employer |  |
| Job Title |  |
| Start Date (dd/mm/yy) |  | End Date (dd/mm/yy) |  |
| Reason for Leaving |  |
| Address of employer / brief details of duties and responsibilities  |  |

|  |  |
| --- | --- |
| Employer |  |
| Job Title |  |
| Start Date (dd/mm/yy) |  | End Date (dd/mm/yy) |  |
| Reason for Leaving |  |
| Address of employer / brief details of duties and responsibilities  |  |
| Employer |  |
| Job Title |  |
| Start Date (dd/mm/yy) |  | End Date (dd/mm/yy) |  |
| Reason for Leaving |  |
| Address of employer / brief details of duties and responsibilities  |  |
| Employer |  |
| Job Title |  |
| Start Date (dd/mm/yy) |  | End Date (dd/mm/yy) |  |
| Reason for Leaving |  |
| Address of employer / brief details of duties and responsibilities  |  |
| Employer |  |
| Job Title |  |
| Start Date (dd/mm/yy) |  | End Date (dd/mm/yy) |  |
| Reason for Leaving |  |
| Address of employer / brief details of duties and responsibilities  |  |

**Gaps**

If you have any gaps in your employment/education history or if you have lived/travelled oversees please use this section to provide details.

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**Qualified Teacher Information**

\*To be completed for Teacher positions only

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| --- | --- | --- |
| Date Qualified Teacher Status gained: |  |  |
| Teacher Registration number: |  |  |
| If you qualified after 7th May 1999, have you completed your induction year? | Yes [ ]  No [ ]  | If yes, give date: |  |

\*For Trainees only

|  |  |  |  |
| --- | --- | --- | --- |
| Have you passed your skill tests? | 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

**Professional Qualifications**

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| --- | --- | --- |
| Name of Professional Association | Professional Qualifications/Membership & Date Obtained mm/yy | By Award or Examination |
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**Education History**

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.

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| --- | --- | --- | --- | --- | --- | --- |
| Date frommm/yy | Date to mm/ yy | Name of School/College | Qualification | Subject | Grade/Level | Date gained mm/yy |
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Copies of essential qualifications will be required on appointment. If there are any gaps in your education history please explain the reasons why in the Gaps section above.

**Training / Continuing Professional Development**

Please list any relevant course or training you have attended in the last five years, starting with the most recent. If applying for a headship, please include details regarding NPQH.

Please continue on a separate sheet if necessary.

|  |  |  |  |
| --- | --- | --- | --- |
| Title of Course | Organising Body | Awards (if any) | Date of Attendance |
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**Supporting Information**

Please provide supporting information for your application, in particular any experience, skills, knowledge, training and qualifications relevant to the post applied for as detailed in the Job Description and Person Specification. Please continue on a separate sheet if necessary but must be no more than 2 sides of A4 in not less than 11 font (Teaching roles).

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**References**

One reference should relate, if applicable, to an appropriate senior professional in your present job, or most recent employer, or a member of the School/University Academic Staff. If you currently work in a school then it is our policy to seek a reference from the Headteacher.Please state in what capacity the two referees are acting, e.g. current employer.

If you have recently left full-time education, please ensure you include a Head Teacher/College/University Principal as one of your references.

1st Referee

|  |  |
| --- | --- |
| Name and Address: |  |
| Telephone Number: |  | Capacity Known: |  |
| Email Address: |  |

2nd Referee

|  |  |
| --- | --- |
| Name and Address: |  |
| Telephone Number: |  | Capacity Known: |  |
| Email Address: |  |

**Teaching roles:** Please note your referees will be contacted should you be shortlisted for interview. The organisation reserves the right to request further references if required to satisfy the pre-employment checking process.

**Support Staff roles only:** Do you consent to your referees being contacted if you are shortlisted for interview:

Yes [ ]  No [ ]

The organisation reserves the right to request further references if required to satisfy the pre-employment checking process.

**Right to Work**

Immigration, Asylum and Nationality Act 2006

All shortlisted applicants will be required to provide original material evidence of their Right to Work in the UK. With reference to the accompanying Guidance Notes, please confirm that you are able to provide the appropriate documents.

 Yes [ ]  No [ ]

**Disclosure & Barring Recruitment Checks**

This post involves working in a school and appointment will therefore be subject to a satisfactory Disclosure & Barring Service (DBS) clearance.

**Health Requirements**

Appointment is subject to a satisfactory medical report from our Medical Adviser.

**Additional pre-employment requirements**

The offer of employment is conditional and subject to checks detailed above and further additional pre-employment checks which include, but may not be limited to, verification of identity, proof of qualifications and registrations and an online check.

**Declarations**

**Please note that if you are shortlisted you will be asked to complete a Self Disclosure of Criminal Convictions Form to self-disclose any criminal history. You will be required to submit a fully completed and signed form prior to interview.**

To your knowledge are you related to a member of staff, or Governor of the School/Greywood MST?

Yes [ ]  No [ ]

 If yes, please state their name and position held:

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 purposes 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 School/Academy or Greywood MST, 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 School/Academy or Greywood MST 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: Date:



Registered Charity No 11885406 (registered in England and Wales)

Greywood

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