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| **Application for Support Post** |
| **Please complete electronically and return to the Trusts HR along with Educational Certificates via email to; HR@Aurigaacademytrust.org.uk** |

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| **Position Applied for:** | | | | | | |
| **School:** | | | | | **Closing Date:** | |
| 1. **Personal Details** | | | | | | |
| Title: | Forename: | | | Surname: | | |
| National Insurance No: | | | | Date of Birth: | | |
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| Permanent Address:  Post Code: |  | | | | | |
| Email Address: |  | | | | | |
| Mobile Phone No: |  | | Home Phone No: | | |  |
| Work Phone No: |  | |  | | | |
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| **ASYLUM AND IMMIGRATION:**  Before you commence employment you **must** provide evidence of your right to work in the United Kingdom. Original identification documents verifying your right to work in the United Kingdom will be checked and a photocopy taken.  If your application is successful and you commence employment, the copy of your identification documents will be retained on your personnel file under regulations governed by the Immigration, Asylum and Nationality Act. | | | | | | |
| **Are you eligible to work in the United Kingdom:** **YES** **/**  **NO** | | | | | | |
| Do you require a work permit: **YES** / **NO** | | If **YES** when does your current permit expire: | | | | |
| **OTHER INFORMATION:**  Are you a relative or partner to any employee, Trustee, member of The Auriga Academy Trust or governor at Clarendon School or Strathmore School?: **YES** **/** **NO** | | | | | | |
| Name: | | Position: | | | | |
| Relationship: | |  | | | | |
| Please state how you heard of this vacancy *(e.g. TES, Eteach, Guardian)*: | | | | | | |
| **Successful applicants will be subject to a Disclosure and Barring Service check.** | | | | | | |

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| 1. **Employment History** | | | | | | | | | | | | | | |
| Are you currently employed by The Auriga Academy Trust? **YES** / **NO**  If **YES** please provide details: | | | | | | | | | | | | | | |
| School: | | | | | | | Campus: | | | | | | | |
| Job Title: | | | | | | | | | | Start Date: | | | | |
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| **Current or Most Recent Employer** | | | | | | | | | | | | | | |
| Employer Name: | | | | | | Employer Address:  Post Code: | | | | | | | | |
| Job Title: | | | | | | | | | | | | | | |
| Date Appointed: | | | | Date of Leaving: | | | | | | | Notice Required: | | | |
| Grade: | | | | | | Total Annual Salary: | | | | | | | | |
| Reason for Leaving: | | | | | | | | | | | | | | |
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| **Previous Employment** *Please provide details of all previous employment in chronological order (most recent first)* | | | | | | | | | | | | | | |
| **From**  (dd/mm/yyyy) | **To**  (dd/mm/yyyy) | **Name of Employer and Nature of Business** | | | | | | | **Position Held and Grade** | | | | **Reason for Leaving** | |
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| **Gaps in Employment History from Age 18** *Please give details* | | | | | | | | | | | | | | |
| **From**  (dd/mm/yyyy) | **To**  (dd/mm/yyyy) | **Details** | | | | | | | | | | | | |
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| 1. **Education and Qualifications** | | | | | | | | | | | | | | |
| **Secondary/ Further/ Higher Education/ Professional Qualifications** *Please list in chronological order (most recent first)*  *Any declared qualifications must be supported with a certificate which must be sent along with the application form.* | | | | | | | | | | | | | | |
|  | | | **Dates** | | | | | **Qualifications Gained** | | | | | | |
| **School/ College/ University/ Professional Body** | | | **From**  (mm/yy) | | **From**  (mm/yy) | | | **Subject** | | | | **Level/ Grade** | | **Date**  (mm/yy) |
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| **Training and Development** *Please include details of any training (e.g. courses, seminars) and development (special projects, personal development courses) relevant to your application. Also include how you keep your job skills up to date.* | | | | | | | | | | | | | | |
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| 1. **Outside Interests/ Activities** | | | |
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| 1. **References**   *Please give the full details of two referees one of whom should be your present/ most recent employer. The other should be able to vouch for your professional work, relatives or friends are* ***NOT*** *acceptable.*  ***PLEASE ENSURE YOU PROVIDE A VALID EMAIL ADDRESS*** | | | |
| **Name:** | | **Name:** | |
| **Job Title:** | | **Job Title:** | |
| **Organisation:** | | **Organisation:** | |
| **Address:**  **Post Code:** | | **Address:**  **Post Code:** | |
| **Telephone:** | | **Telephone:** | |
| **Email:** | | **Email:** | |
| Please indicate if we may proceed with a reference before your interview should you be shortlisted:  **YES**  **/**  **NO** | | | |
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| 1. **Safeguarding, DBS Checking and Criminal Convictions**   *The nature of your employment within school means that your post falls within the scope of The Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (2013 and 2020) and as such you are required to declare any convictions or cautions (excluding youth cautions, reprimands, or warnings) that are not class as protected as defined by the Ministry of Justice. The declaration completed by you, as a part of your employment application has been accepted for this purpose and as such if you have included false or misleading information you may be liable to dismissal from the service of the Academy Trust.* | | | |
| 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. Guidance about whether a conviction or caution should be disclosed can be found on the Ministry of Justice website.  Do you have any convictions or cautions (excluding youth cautions, reprimands, or warnings) that are not ‘protected’ as defined by the Ministry of Justice? **YES**  **NO**  **If YES** **please attach details in a sealed envelope, including the offence and the date.**  https://www.gov.uk/government/publications/dbs-filtering-guidance | | | |
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| 1. **Medical Information** | | | |
| Note; A successful candidate will complete an Occupational Health Work Health Assessment Questionnaire and may be asked to attend a medical examination. | | | |
| **Do you consider yourself to have a disability:**  **YES** **/**  **NO** | | | |
| Is there anything we need to know about your disability in order to offer you a fair selection interview: **YES** **/NO**  **If YES please provide details:** | | | |
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| 1. **Declaration** | | | |
| I certify that the information given above and overleaf is correct to the best of my knowledge. I understand that an offer of appointment will be subject to satisfactory references, DBS clearance, proof of identity and right to live and work in UK, medical checks and verification of relevant qualifications.  I give consent for personal information provided as part of this application to be held and processed in accordance with the General Data Protection Regulation (GDPR) and the expected provisions of the Data Protection Act 2018 (DPA 2018) as set out in the Data Protection Bill.  I accept that if any of the enclosed information is found to be untrue or misleading after my appointment, I may be liable for dismissal without notice. | | | |
| **Print Name:** | **Signature:** | | **Date:** |
| 1. **Letter of Application**   **Explain how your skills, ability, knowledge and experience match the individual requirements in the person specification. Give evidence/examples wherever you can in support of your application. Relevant experience may includes paid work or other activities such as college, leisure, family or domestic, community and voluntary work.**  **Please address all criteria in the person specification.**  **DO NOT ATTACH A CV, COVERING LETTER OR ADDITIONAL DOCUMENTS.** | | | |
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| **Monitoring Information** | | | | |
| The Auriga Academy Trust wants to meet the aims and commitments set out in its equality policy. This includes not discriminating under the Equality Act 2010, and building an accurate picture of the make-up of the workforce in encouraging equality and diversity.  The information provided will not be used for selection purposes and will stay confidential. It will be stored securely and will not be kept as part of an individual's personnel records. | | | | |
| **Gender:** | Male  Female  Non-binary  Prefer not to say  If you prefer to use your own term, please specify: | | | |
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| **Disability:** | Do you consider yourself to have a disability or health condition: **YES** **/ NO** | | | |
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| **Ethnicity:**  Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong.  *Please mark X in the appropriate box* | | | | |
| White- British | |  | Asian/ Asian British- Pakistani |  |
| White- Irish | |  | Asian/ Asian British- Bangladeshi |  |
| Any other white background | |  | Chinese |  |
| Mixed White and Black Caribbean | |  | Any other Asian background |  |
| Mixed White and Black African | |  | Black/ Black British- Caribbean |  |
| Mixed White and Asian | |  | Black/ Black British- African |  |
| Any other mixed background | |  | Any other Black/ African/ Caribbean background |  |
| Asian/ Asian British- Indian | |  | Arab |  |
| Any other ethnic group | |  | Ethnicity not provided |  |
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| **Religion:** | | | | |
| No religion or belief | |  | Buddhist |  |
| Christian | |  | Hindu |  |
| Jewish | |  | Muslim |  |
| Sikh | |  | Other religion or belief |  |
| Prefer not to say | |  |  |  |