

Application Form Mid Essex Anglican Academy Trust



Applicant Surname (CAPITAL LETTERS):	

Please return your completed application form to: finance@mountnessing.essex.sch.uk

Thank you for your interest in this post.

The following information is necessary to ensure that full consideration can be given to all candidates. The information given will be treated as confidential.

Please complete the application form in black ink or type and ensure you complete all the sections. The Declaration must be signed and can be found on Page 10. When submitting this form electronically you will be required to confirm the information is accurate by ticking the box in section 15.

If you have any special requirements and/or require reasonable adjustments to enable you to complete this form and/or during the recruitment process please contact the school office.

Post Details	Section 1
Application for appointment as:	
Reference no. (if applicable):	
Closing date:	
Do you need permission to work in the UK? Yes \square No \square	

Personal details		Section 2
Last name and title:	First name(s):	
Last name and title.	riist ilaille(s).	
Previous names:	Date of birth:	
Home telephone no:	Work telephone no:	
Home email address:	Work email address:	
Address:		
National Insurance no:		
Please tick the box if you do not wish to be contact	ed at work:	
		Section 3
Present employment (if currently employed	<u>l)</u>	
Employer's name and address (if applicable):		
Nature of business:	Job title:	

Grade/salary spine:

Notice required:

Date appointed:

Current salary (point):

Reason for leaving:

Allowance(s) received: Type(s):

Value(s): £

Brief outline of d					
Daniero con la constant					Section 5
Previous employ	<u>ment</u>				
Please include all ful separate sheet if ne		art time pos	itions. Please lis	t the most recent fir	st and continue on a
Employer	Start Date	End Date	Job Title	Salary/Grade	Reason for Leaving

Breaks in emp	ployment history	Section 6
		oyment since leaving school, give details of these periods and your nemployment, career break, voluntary work, training.
Start date	End date	Reason for break
Ability to trav	vel (if required)	Section 7

Yes □ No □

Yes □ No □

Do you have a valid driving licence?

If not, are you able to travel, for work purposes,

to use for work purposes?

by another means of transport?

Section 8

Secondary school information (please list most recent first)

School(s)	From	То	Qualification/subject obtained and awarding body	Grade	Dates

Continuing Education (University/College/Apprenticeships/Professional Qualifications) Please list most recent first.					Section 9
Education establishment	From	То	Qualification/subject obtained and awarding body	Grade/ Level	Dates
			<u>l</u>	1	

	Section 10
Professional qualifications (Including details of professional association membership	0)
Do you hold Qualified Teacher Status (QTS)? Yes □ No □	
Teacher reference number:	
If yes, please complete the following: Date of NQT/ECT Statutory Induction Period (if qualified since August 1999) Started: Completed:	

Section 11

Other relevant training and development activities attended in the last five years

Please list the most recent first and continue on a separate sheet if necessary.

Date	Organising body	
	Date	Date Organising body

Section 12

<u>Information in support of this application</u>

Please use the person specification as a prompt to describe the experience, skills, competencies and qualifications that make you suitable for this job. There may have been gained from your work experience, any voluntary or community work or any other organisation you may have been involved with. You should ensure that any information submitted reflects your experience relating to the competencies that are detailed in the Person Specification (please continue on a separate sheet if necessary). If you are a teacher, please provide details of any specialist teaching experience/skills you possess that may be relevant to the post.

References Section 13

Please give the names and addresses of your two most recent employers (if applicable). If you are unable to do this, please clearly outline who your references are. In the case of school references, this should be the Headteacher (or the Chair of Governors for Headteacher applications). Applicants must ensure referees consent to be contacted and for reference information to be held for a period of 6 months.

Name and address:	Name and address:
Position:	Position:
Telephone number:	Telephone number:
Relationships between referee and applicant:	Relationships between referee and applicant:
Period of time applicant known to referee:	Period of time applicant known to referee:
Email address:	Email address:
Note: (i) Referees will be contacted before intervie (ii) If either of your referees know you by and (iii) The Trust may contact other previous emp (iv) References will not be accepted from relacapacity of friends.	ther name please give details. ployers for a reference with your consent.

Close personal relationships

Section 14

Are you a relative or partner, or do you have a close personal relationship with, any employee, Trustee or Governor of the establishment to which your application is being made (or to any County Councillor or employee of Essex County Council)? If 'yes' please state the name(s) of the person(s) and relationship. (See notes below).

Yes 🗆	No 🗆	Name:
res 🗀	NO L	Mairie.

Failure to disclose a close personal relationship as above may disqualify you. Canvassing of Trustees, Governors, County Councillors or Senior Managers or the Trust/Essex County Council by or on your behalf is not allowed.

_					-	
•	Δ	ct	10	m	. 1	ь,

Please read the following statements and information relating to your application carefully. By signing and submitting this form and clicking on the box below you are certifying that the information you have supplied is accurate and confirming that the declarations are true to the best of your knowledge. Any false information will result in the withdrawal of any offer of employment or, in the event of employment, in disciplinary investigation by the school which may result in dismissal.

Declaration

	I certify that the information I have supplied on this form is accurate and true to the best of my
kno	wledge.

Disclosure of Criminal Convictions

Shortlisted candidates will be asked to complete a Self-Disclosure Form (SD2) to disclose whether they:

- have any unspent conditional cautions or convictions under the Rehabilitation of Offenders Act
 1974
- have any adult cautions (simple or conditional) or spent convictions that are not protected as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2020
- They are subject to any prohibitions relevant to the role.

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 notes are available to accompany the SD2 form to assist candidates with information which must be disclosed. Any information disclosed will be treated in the strictest confidence.

Where appropriate for the role, a disclosure/status check will be sought from the Disclosure and Barring Service (DBS) in the event of a successful application, along with other relevant pre-employment checks.

Shortlisted candidates applying for a relevant post in a school setting covered by the Childcare (Disqualification) Regulations 2018 ("the Regulations") will be asked to complete a Disqualification Declaration Form.

A disqualified person may only be employed in a relevant post if they obtain a waiver from Ofsted. A copy of the Disqualification Declaration Form is available from the school office if you wish to review this Form prior to submitting your application.

Safer Recruitment and Childcare Disqualification Checks

outer rectation and annature proquamental or enecks		
It is unlawful for a person who is barred from working with children to apply to work in a regulated position.		
I certify that I am not disqualified from working with children or subject to sanctions imposed by a regulatory body which would prohibit or restrict me from applying for this post.		

Data Protection

I acknowledge that by completing this form the school will hold and process personal data (including special categories of data e.g. information about health) about me in line with their data protection policy. I acknowledge that the school will use/process this information for the duration of the recruitment process. I acknowledge this information will only be shared in line with the Privacy Notice.

If I am the successful applicant I acknowledge that this information will be retained in line with the school's retention schedule. If I am not the successful candidate I acknowledge this information will be retained by the school in a secure electronic/paper system for no longer than 6 months from the date of the appointment of the successful candidate.

All forms submitted (in paper or electronic format) will be held securely by the school in line with their data protection policy.

Thank you for applying for this post and your interest in working for this school. It is not our normal practice to acknowledge receipt of paper applications. If you submit this form electronically you will receive confirmation that the form has been received.

Declaration and Signature			
Name:	Signed:		
Date:			