

Application Form

Applicant Surname (CAPITAL LETTERS):

Please return your completed application form to:

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 the reverse of this form. 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:	
School:	
Reference no. (if applicable)	
Closing date:	

	Section 2
Personal Details	
Last name and title:	First name (s):
Previous names:	Date of birth:
Home telephone no:	Home email address:
Work telephone no:	Work email address:
Address:	
	National Insurance no:
Do you have the right to work in the UK?	Yes No
	Section 3
Present Employment (if current	tly employed)
Employer's name and address (if applicab	le):
Nature of business:	
Current post title:	Date appointed: Current salary: £
Current post title: Grade/salary range:	Date appointed:
Current post title: Grade/salary range:	Date appointed: Current salary: £ Allowance(s) received: Type(s)
Current post title: Grade/salary range: Notice required:	Date appointed: Current salary: £ Allowance(s) received: Type(s) Value(s): £

Brief outline of duties in your current or most recent job

Previous Employment

Please include all full time and part time positions. Please list the most recent first and continue on a separate sheet if necessary.

Employer	Start date	End date	Job Title	Reason for leaving

Section 5

Section 4

Breaks in Employment History

If you have had any breaks in employment since leaving school, give details of these periods and your activities during these times e.g. unemployment, career break, voluntary work, training.

Start date	End date	Reason for break	

Ability to travel (if required)		Section 7	
Do you have a valid driving licence?	Yes	No	
Do you have access to a vehicle which you are able to use for work purposes?	Yes	No	
If not, are you able to travel, for work purposes, by another means of transport?	Yes	No	

School(s) From To Qualification/subject Grade Dates obtained and awarding body	Secondary S	School Edu	catior	n (please list most recent fir	rst)	Section 8	
	School(s)	From	То	obtained and awarding	Grade	Dates	

Section 6

Continuing Educa Please list most recent	•	Jniversi	ty/College/Apprenticeships	etc.)	ction 9
Education Establishments	From	То	Qualification/subject obtained and awarding body	Grade	Dates

Professional Qualif	ications essional association me	mbership	Section 10
Do you hold Qualified Teach	ner Status (QTS)?	Yes	No
Teacher Reference Number	:		
If yes please complete	e the following:		
Date NQT Statutory Induction maintained schools)	on Period (if qualified since A	ugust 1999) (statutory rec	quirement for
Started:	Completed:		/

Other relevant training an in the last five years Please list the most recent first and o	•		Section 11
Brief description/Course title	Date	Organising bo	dy

Section 12

Information in support of this application

Please use the person specification as a prompt to describe the experience, skills, competencies and qualifications that make you suitable for this job. These 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

Please give the name and addresses of your two most recent employers (if applicable). If you are unable to do this, please clearly outline who your referees are. Applicants must ensure referees consent to be contacted and for reference information to be held for a period of 6 months.

1) Name		2)	Name
Address:			Address:
Position:			Position:
Telephone number:			Telephone number:
Relationship betwee	en referee and applicant:		Relationship between referee and applicant:
Period of time appli	cant known to referee:		Period of time applicant known to referee:
Email address:			Email address:
If you are able,	please provide a pri	iest/m	inister reference below.
3) Name			
Address:			
Position:			
Telephone number:			
Email address:			_
Note: (i) Referee	s will be contacted before	e intervi	iews.
(ii) If either	of your referees know yo	u by an	other name please give details.
(iii) The scho	ool may contact other pre	evious e	employers for a reference without your consent
	ices will not be accepted / of friends.	from re	elatives or from people writing solely in the

employee of Essex County Council)? If 'yes', please state the nam (see notes below).	e(s) of the person(s) and relationship
	Yes No
Failure to disclose a close personal relationship as above may disq Canvassing of Governors, Trustees, County Councillors or senior M	
Council by or on your behalf is not allowed.	

Please read the following statements and information relating to your application carefully. By 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 knowledge.

Disclosure of Criminal Convictions

Short-listed candidates will be asked to complete a Self-Disclosure Form (SD2) and, 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.

A conviction/caution/reprimand will not necessarily be a bar to obtaining employment, save in the case of management positions where a S128 Direction issued by the Secretary of State will prohibit employment.

Safer Recruitment and Childcare Disqualification Checks

I certify that I am not disqualified from working with children or subject to any sanctions imposed by a regulatory body which would prohibit or restrict me from applying for this post.

Short listed candidates applying for a relevant post in a school setting covered by the Childcare (Disqualification) Regulations 2009 ("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.

Close Personal Relationships

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).

Section 14

Section 15

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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.

Name:	Date [.]
	Bato:

Signed: _____