



Application Form Mid Essex Anglican Academy Trust



Applicant Surname (CAPITAL LETTERS): Click or tap here to enter text.

Please return your completed application form to: admin@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 7.

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.

Section 1

Post Details

Application for appointment as: Click or tap here to enter text.

Reference no. (if applicable): Click or tap here to enter text.

Closing date: Click or tap to enter a date.

Do you need permission to work in the UK? Yes ☐ No ☐

Section 2

Personal details

Last name and title: Click or tap here to enter text.

First name(s): Click or tap here to enter text.

Previous names: Click or tap here to enter text.

Date of birth: Click or tap to enter a date.

Home telephone no: Click or tap here to enter text.

Work telephone no: Click or tap here to enter text.

Home email address: Click or tap here to enter text.

Work email address: Click or tap here to enter text.

Address: Click or tap here to enter text.

National Insurance no: Click or tap here to enter text.

Please tick the box if you do not wish to be contacted at work: ☐

Section 3

Present employment (if currently employed)

Employer's name and address (if applicable): Click or tap here to enter text.

Nature of business: Click or tap here to enter text.

Job title: Click or tap here to enter text.

Date appointed: Click or tap to enter a date.

Grade/salary spine: Click or tap here to enter text.

Current salary (point): Click or tap here to enter text.

Notice required: Click or tap here to enter text.

Allowance(s) received: **Type(s):** Click or tap here to enter text.

Value(s): £ Click or tap here to enter text.

Reason for leaving: Click or tap here to enter text.

Section 4

Brief outline of duties in your current or most recent job

Click or tap here to enter text.

Section 5

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 | Salary/Grade | Reason for Leaving |
|------------|--------------|--------------|------------|--------------|--------------------|
| Enter text | Enter a date | Enter a date | Enter text | Enter text | Enter text |
| Enter text | Enter a date | Enter a date | Enter text | Enter text | Enter text |
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Section 6

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 |
|--------------|--------------|------------------|
| Enter a date | Enter a date | Enter text |
| Enter a date | Enter a date | Enter text |
| Enter a date | Enter a date | Enter text |

Section 7

Ability to travel (if required)

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 ☐

Secondary school information (please list most recent first)

| School(s) | From | To | Qualification/subject obtained and awarding body | Grade | Dates |
|------------|--------------|--------------|--|------------|--------------|
| Enter text | Enter a date | Enter a date | Enter text | Enter text | Enter a date |
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Section 9

Continuing Education (University/College/Apprenticeships/Professional Qualifications)

Please list most recent first.

| Education establishment | From | To | Qualification/subject obtained and awarding body | Grade/ Level | Dates |
|-------------------------|--------------|--------------|--|--------------|--------------|
| Enter text | Enter a date | Enter a date | Enter text | Enter text | Enter a date |
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Section 10

Professional qualifications (Including details of professional association membership)

Do you hold Qualified Teacher Status (QTS)? Yes ☐ No ☐

Teacher reference number: Click or tap here to enter text.

If yes, please complete the following:

Date of Statutory Induction Period (if qualified since August 1999)

Started: Click or tap to enter a date.

Completed: Click or tap to enter a date.

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.

| Brief description/Course title | Date | Organising body |
|--------------------------------|------------|-----------------|
| Enter text | Enter text | Enter text |
| Enter text | Enter text | Enter text |
| Enter text | Enter text | Enter text |

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. 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.

Click or tap here to enter text.

References

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:

Click or tap here to enter text.

Position:

Click or tap here to enter text.

Telephone number:

Click or tap here to enter text.

Relationships between referee and applicant:

Click or tap here to enter text.

Period of time applicant known to referee:

Click or tap here to enter text.

Email address:

Click or tap here to enter text.

Name and address:

Click or tap here to enter text.

Position:

Click or tap here to enter text.

Telephone number:

Click or tap here to enter text.

Relationships between referee and applicant:

Click or tap here to enter text.

Period of time applicant known to referee:

Click or tap here to enter text.

Email address:

Click or tap here to enter text.

Note: (i) Referees will be contacted before interviews.

(ii) If either of your referees know you by another name please give details.

(iii) The Trust may contact other previous employers for a reference with your consent.

(iv) References will not be accepted from relatives or from people writing solely in the capacity of friends.

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).

Yes ☐ No ☐

Name: Click or tap here to enter text.

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.

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 knowledge.

Disclosure of Criminal Convictions

Preferred 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; or
- 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.

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. A person's criminal record will not in itself 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 sanctions imposed by a regulatory body which would prohibit or restrict me from applying for this post.

Preferred 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.

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: Click or tap here to enter text.

Signed: Click or tap here to enter text.

Date: Click or tap to enter a date.