

# **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:	

Personal Details		Section 2
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	
Drocont Employment (1)		ction 3
Present Employment (if currently Employer's name and address (if applicable)		
Employer 3 hame and address (ii applicable)	•	
Nature of business:		
Current post title:	Date appointed:	
Grade/salary range:	_ Current salary: £	
Notice required:	_ Allowance(s) received: Type(s)	
Reason for leaving:	Value(s): £	
Please tick the box if you do not wish to be	pe contacted at work	

<b>nt</b> e and part ti ate sheet if n	me positions. P	Section 5
	THE POSITIONS. I	Please list the most recent
		Flease list the most recent
End date	Job Title	Reason for leaving

Brief outline of duties in your current or most recent job

Section 4

<b>Continuing Educat</b>	t <b>ion</b> (Univers	ity/College/Apr	orenticeships e	etc.)	Section 9	
Please list most recent	first.	, , , , , ,	•	·		
Education Establishments	From To	Qualification obtained and body	•	Grade	e Dates	
Professional Quali Including details of prof	fessional asso		ership Yes	So No	ection 10	
Teacher Reference Numbe						
If yes please completed Date NQT Statutory Induction maintained schools)  Started:	ion Period (if qu	alified since Augu	st 1999) (statuto			
					Caption	
Other relevent tre	ining and d	evelopment	activities a	ttended	Section	11 —
Other relevant train the last five year Please list the most recent	ırs	-		ry.		
in the last five yea	I <b>rs</b> t first and contin	-	sheet if necessa	ry. rganising b	oody	
in the last five year Please list the most recent	I <b>rs</b> t first and contin	ue on a separate	sheet if necessa		oody	

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.

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### 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 between referee and applicant:	Relationship 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 inte	rviews.
(ii) If either of your referees know you by a	another name please give details.
(iii) The school may contact other previous	s employers for a reference with your consent.
(iv) References will not be accepted from capacity of friends.	relatives or from people writing solely in the
Close Personal Relationships	Section 14
Are you a relative or partner, or do you have a close or Governor of the establishment to which your appli employee of Essex County Council)? If 'yes', please (see notes below).	cation is being made (or to any County Councillor or
	Yes No
Failure to disclose a close personal relationship as a Canvassing of Governors, Trustees, County Councill Council by or on your behalf is not allowed	

Section 15

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.

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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 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.

# **Data Protection (continued)**

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:	
Signed:		