



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.
Post details Section 1
Application for appointment as:
School:
Reference no. (if applicable)
Closing date:
Do you need permission to work in the UK?

This document is available on request in large print or Braille, on audio tape or disk

**ECC1791** page 1 of 8





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:		
Please tick the box if you do not wish to be co	ntacted at work		
		Section 3	
Present employment (if currently emp	loyed)	Section 3	
Employer's name and address (if applicable):			
Nature of business:			
Job title:	Date appointed:		
Grade/salary spine:	Current salary (point):		
Notice required:	Allowance(s) received:	Type(s)	
Reason for leaving:		Value(s): £	
Priof outline of duties in your ourren	t or most recent ich	Section 4	
Brief outline of duties in your curren	t or most recent job		

**ECC1791** page 2 of 8

Previous employmer Please list the most rece					
Employer	Start date	End date	Job title	Salary Grade	Reason for leaving
	June			9.445	loaviiig
Breaks in employment	ent history	<u> </u>			Section 6
If you have had any brea	aks in employ	ment sinc	•		these periods
and your activities during training.	these times	e.g. unen	iployment, raisi	ing family, volun	tary work,
Mobility (Please complete the sethese requirements)	ction if the Pe	erson Spe	cification for the	e post includes	Section 7
Do you have a valid driving	ng licence?				Yes No
Do you have access to a	vehicle which	n you are a	able to use for w	ork purposes?	Yes No
If not, are you able to travel, for work purposes, by another means of transport?					

**ECC1791** page 3 of 8

Secondary School Education (Please list most recent first)  Section 8						
School(s)	From	То	Qualification/subject obtained and awarding body	Grade	Dates	
Continuing Education Please list most recent first	(Univer	sity/Coll	ege/Apprenticeships et	tc.)	Section 9	
Educational establishments	From	m To	Qualification/subjection obtained and awarding body:	ect Level/ Grade		
Professional qualifications Including details of professional Section 10						
association membership						
Do you hold Qualified Teacher Status (QTS)? Yes No DfE number:						
If yes please complete the following:						
Date Statutory Induction Period (if qualified since August 1999) started:  completed:						
General Teaching Council Registration date: GTC Reg/No						
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						

**ECC1791** page 4 of 8

## 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.

**ECC1791** page 5 of 8

Referen	ces	Section 13			
_	re the names and addresses of your to e to do this, please clearly outline who	wo most recent employers (if applicable). If you your references are.			
Name and	address:	Name and address:			
Position:		Position:			
Telephone number:		Telephone number:			
Fax number:		Fax number:			
Email address:		Email address:			
Note: (i)	Referees will be contacted before int	erviews.			
(ii)	(ii) If either of your referees know you by another name please give details.				
(iii)	) The School/County Council may contact other previous 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 pe	ersonal relationships	Section 14			
or Govern	or of the establishment to which your	elose personal relationship with, any employee application is being made or to any County il? If 'yes' please state the name(s) of the			

person(s) and relationship. (see notes below).

\_\_ No 

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

continued overleaf

ECC1791 page 6 of 8 Please confirm the following statements are true by signing the box below.

## **Declaration**

I certify that, to the best of my belief, the information I have provided is true and I understand that any false information will result, in the event of employment, in disciplinary investigation by the School, and is likely to result in dismissal.

### **Disclosure of Criminal Convictions**

Short-listed candidates will be asked to complete a 'Disclosure of Criminal Convictions' form and, where appropriate, a Disclosure will be sought from the Criminal Records Bureau in the event of a successful application. A conviction will not necessarily be a bar to obtaining employment.

## Safer Recruitment

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

### **Data Protection Act 1998**

I hereby give my consent for personal information (including recruitment monitoring data) provided as part of this application to be held on computer or other relevant filing systems and to be shared with other accredited organisations or agencies in accordance with the Data Protection Act 1998.

# Correspondence

Thank you for applying for this post. Your interest in working for us is very much appreciated. It is not our practice to acknowledge receipt of applications. However, if you would like to be informed of the outcome of your application once the selection process has been completed, then please enclose a stamped addressed envelope.

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Signed: Date:	

**ECC1791** page 7 of 8