**ALL SAINTS’ PRIMARY SCHOOL  
DOGSTHORPE ROAD, PETERBOROUGH PE1 3PW  
01733 563688 office@allsaints.peterborough.sch.uk**

Internal use only

Reference no:

Date received:

# Employment Application Form: Support

We are committed to safeguarding and promoting the welfare of children and young people and expect all staff and volunteers to share this commitment.

Please ensure that you complete **all** sections of Part 1 and Part 2 of the application. Please note that providing false information will result in the application being rejected, withdrawal of any offer of employment, summary dismissal if you are in post, and possible referral to the police. Please note that checks may be carried out to verify the contents of your application form. Please complete the form in black ink or type. CVs are not accepted.

|  |  |
| --- | --- |
| Vacancy Job Title |  |

## Part 1: Information for Shortlisting and Interviewing

Initials Surname or Family Name

1. Letter of Application

Please enclose a letter of application. Please refer to the applicant information pack which may include instructions on how to complete the letter of application.

1. Current/Most Recent Employment:

|  |  |
| --- | --- |
| Name, address of employer |  |
| Job title  *Please enclose a copy of the job description,  if possible* |  |
| Date appointed to current post |  |
| Current salary |  |
| Date available to begin new job |  |

1. Full Chronological History

Please provide a full history in date order, most recent first, since leaving secondary education, including periods of any post-secondary education/training, and part-time and voluntary work as well as full time employment, with start and end dates, explanations for periods not in employment or education/training, and reasons for leaving employment.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Job title  or positon | Name and address of school,  other employer, or  description of activity | Number on  roll and  type of  school, if  applicable | Full or  part-time | Dates | (DD/MM/YYYY) | Reason  for  leaving |
| From | To |
|  |  |  |  |  |  |  |
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Please enclose a continuation sheet if necessary.

1. Secondary Education and Qualifications (e.g. GSCE)

|  |  |  |  |
| --- | --- | --- | --- |
| Name of school/college | From | To | Qualifications gained |
|  |  |  |  |

1. Further or Higher Education

Please provide details of any recognised qualifications or courses attended which are relevant to the job application.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of FE college, university or awarding body | Dates | | Full or  part-time | Qualifications obtained |
| From | To |
|  |  |  |  |  |

1. Other Relevant Experience, Interests and Skills

|  |
| --- |
|  |

1. Referees

Please provide details of two people to whom reference may be made. The first referee should normally be your present or most recent Headteacher or equivalent person. If you are not currently working with children please provide a referee from your most recent employment involving children. Referees will be asked about all disciplinary offences which may include those where the penalty is “time expired” if related to children. Referees will also be asked whether you have been the subject of any child protection concerns, and if so, the outcome of any enquiry. References will not be accepted from relatives or from people writing solely in the capacity of friends.

**It is normal practice to take up references on shortlisted candidates prior to interview.** This is in line with the most recent version of Keeping Children Safe in Education statutory guidance.

**First Referee**

|  |  |
| --- | --- |
| Title and name |  |
| Address and post code |  |
| Telephone number |  |
| Email address |  |
| Job title |  |
| Relationship to applicant |  |

I consent to this reference being requested before interview.

Yes No

**Second Referee**

|  |  |
| --- | --- |
| Title and name |  |
| Address and post code |  |
| Telephone number |  |
| Email address |  |
| Job title |  |
| Relationship to applicant |  |

I consent to this reference being requested before interview.

Yes No

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## Part 2 Internal Ref. No.

This section will be separated from Part 1 on receipt. Relevant responses may be verified prior to shortlisting and/or used for administration purposes but will not then be used for selection purposes.

1. Personal Information

|  |  |
| --- | --- |
| 1. Surname or family name |  |
| 1. All forenames |  |
| 1. Title |  |
| 1. Current address |  |
| 1. Postcode |  |
| 1. Home telephone number |  |
| 1. Mobile telephone number |  |
| 1. Email address |  |
| 1. Do you have a current full clean driving licence? *Only applicable for posts that require driving* | Yes No |
| 1. Do you require sponsorship (previously a work permit)? | Yes No  If YES please provide details under separate cover. |

1. Compulsory Declaration of any Convictions, Cautions or Reprimands, Warnings or Bind-overs

If you are invited to interview you will be required to complete a “Disclosure of Criminal Record” form and bring the completed form to interview. If the job involves contact with children up to age 8 you will also be required to make a Disqualification Declaration. The information you give will be treated as strictly confidential. Disclosure of a conviction, caution, bind-over order, warning or reprimand will not automatically disqualify you from consideration. Any offence will only be taken into consideration if it is one which would make you unsuitable for the type of work you are applying for. However, offences relating to children may make you unsuitable since this is a “regulated position” under the Under the Criminal Justice & Courts Services Act 2000.

1. Data Protection

The information collected on this form will be used in compliance with Data Protection regulations. By supplying information, you are giving your consent, if appointed, to the information being processed for all employment purposes as defined by statute. The information may be disclosed, as appropriate, to the governors, to Occupational Health, to the Teachers Pensions Agency, to the Department for Education, to pension, payroll and personnel providers and relevant statutory bodies. This form will be kept strictly confidential but may be photocopied and may be transmitted electronically for use by those entitled to see the information as part of the recruitment process. When the recruitment process is completed, your form will be stored securely for a maximum of six months then securely destroyed, unless you are employed as a result of this recruitment process in which case this application form will be retained as part of your personnel record.

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1. Notes

(a) Under the Criminal Justice & Courts Services Act 2000 it is an offence for an individual who has been disqualified from working with children to knowingly apply for, offer to do, accept, or do any work in a ‘regulated position’. The position you are applying for is a “regulated position”.

(b) Canvassing, directly or indirectly, an employee or governor will disqualify the application.

(c) Candidates recommended for appointment will be required to provide a satisfactory Enhanced DBS certificate and complete a pre-employment medical questionnaire and may be required to undergo a medical examination.

(d) This organisation is under a duty to protect the public funds it administers, and to this end may use the information you may provide as part of the recruitment process for the prevention and detection of fraud. It may also share this information with statutory bodies responsible for auditing or administering public funds for these purposes.

1. Declaration

I certify that, to the best of my knowledge and belief, all particulars included in my application are correct. I understand and accept that providing false information will result in my application being rejected or withdrawal of any offer of employment, or summary dismissal if I am in post, and possible referral to the police. I understand and accept that the information I have provided may be used in accordance with paragraph 13 above, and in particular that checks may be carried out to verify the contents of my application form.

Signature of Applicant:

Print Name:

Date:

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Part 3: Equality and Diversity Monitoring

This section will be separated from part 1 and part 2. Collection of equality information is solely for monitoring purposes to ensure that our policies and procedures are effective. We also collect this data in accordance with the general and specific public sector equality duties under the Equality Act 2010. Any data you enter onto this monitoring form will only be used for monitoring purposes and will not be used in assessing and or scoring your application or during the interview process. This information is kept fully confidential and access is strictly limited in accordance with the Data Protection Act.

|  |  |  |  |
| --- | --- | --- | --- |
| Ethnicity | Workforce census code | | Please tick |
| White | WBRI | British English Welsh Northern Irish Scottish |  |
|  | WIRI | Irish |  |
|  | WIRT | Traveller of Irish Heritage |  |
|  | WROM | Gypsy / Roma |  |
|  | WOTH | Any other White background |  |
| Mixed | MWBC | White and Black Caribbean |  |
|  | MWBA | White and Black African |  |
|  | MWAS | White and Asian |  |
|  | MOTH | Any other Mixed background |  |
| Asian or Asian British | AIND | Indian |  |
|  | APKN | Pakistani |  |
|  | ABAN | Bangladeshi |  |
|  | CHNE | Chinese |  |
|  | AOTH | Any other Asian background |  |
| Black or Black British | BCRB | Black – Caribbean |  |
|  | BAFR | Black – African |  |
|  | BOTH | Any other Black background |  |
| Other ethnic group | ARAB | Arab |  |
| CHNE | Chinese |  |
| REFU | Refused/Prefer Not to Say |  |
| OOTH | Any other ethnic group |  |

|  |  |
| --- | --- |
| Sexual orientation | Please  tick |
| Bi-sexual |  |
| Gay Man |  |
| Gay Woman |  |
| Heterosexual |  |
| Other |  |
| Prefer not to say |  |

|  |  |
| --- | --- |
| Gender | Please  tick |
| Female |  |
| Male |  |
| Transgender |  |
| Prefer not to say |  |

|  |  |
| --- | --- |
| Personal relationship | Please  tick |
| Single |  |
| Living together |  |
| Married |  |
| Civil Partnership |  |
| Prefer not to say |  |

|  |  |
| --- | --- |
| Religion or belief | Please tick |
| No religion |  |
| Christian (including Church of England, Catholic, Protestant and all other Christian denominations) |  |
| Buddhist |  |
| Hindu |  |
| Jewish |  |
| Muslim |  |
| Sikh |  |
| Any other religion (Write in) |  |
| Prefer not to say |  |

|  |  |
| --- | --- |
| Disability  *Do you consider that you have a disability?* | Please tick |
| Yes - Please complete the grid below |  |
| No |  |
| Prefer not to say |  |
|  |  |
| My disability is: |  |
| Physical Impairment |  |
| Sensory Impairment |  |
| Mental Health Condition |  |
| Learning Disability/ Difficulty |  |
| Long standing illness |  |
| Other |  |
| Prefer not to say |  |