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#### APPLICATION FOR EMPLOYMENT

**Support Staff**

**Applicant’s Name:**

**Title of post applied for:**

Job Reference No. Closing Date:

## Committed to Equal Opportunities

##### GUIDANCE FOR THE COMPLETION OF THE APPLICATION

**FOR EMPLOYMENT FORM**

This information has been compiled to assist you in the completion of the application form.

Please remember the application form is an essential part of our selection process, and the information you give will assist in selecting a shortlist of candidates for interview, it is therefore important that you complete the application in full.

**Please complete the form using black ink, or type.**

###### Completing your Application Form

* Read through the information you have been sent, and particularly study the advertisement, job description and person specification, (where applicable).
* Complete as fully as possible all of the sections. If any information requested is not applicable to you then please state this in the relevant section. If you have to write more than the space provides on the application form, use additional sheets of paper ensuring that you mark clearly your name and the job title and reference number on each sheet.
* Curriculum Vitae (CV) – please do not enclose a CV. You are asked to complete the application form in full. If a CV is required this will be specifically requested. It is acceptable, however, to provide additional information in support of your application, but this should be relevant to the job you are applying for.
* The form can be completed and emailed to the school or printed and posted.

###### People with Disabilities

In order to meet the requirements of the Disability Discrimination Act 1995, and our Equal Opportunities Policy to offer a guaranteed interview to people with disabilities who meet the basic job requirements, this form seeks information on whether you consider yourself to have a disability. As the Disability Discrimination Act contains definitions of what is meant by “disability” or a “disabled person” and “substantial adverse effect”, the following notes should help you to complete the answer relating to disability.

**Defining a disabled person:**

A person has a disability if s/he has a physical and mental impairment, which has a substantial and long-term adverse effect on her/his ability to carry out normal day to day activities.

**Impairment:**

This covers physical and mental impairment including learning disabilities and hearing and sight impairments.

**Substantial adverse effect:**

This is something that is more than minor or trivial effect, and is beyond the normal differences in ability, which exist.

**Long-term effect:**

This is one which has lasted or is likely to last for at least 12 months, or for the rest of a person’s life. The loss of mobility due to a broken leg, which a person is likely to recover from in less than 12 months, or a long-term illness from which a person is likely to recover within 12 months are not included.

Normal day-to-day activities

These are activities carried out by people on a regular basis. It does not include activities which are normal for only a particular person, or a group of people.

An impairment has a substantial adverse effect if it affects:

• Mobility • Manual dexterity • Physical co-ordination • Continence

• Ability to lift, or • Speech, hearing or • Memory, or the ability

move everyday eyesight (excludes the to concentrate, learn or

objects wearing of spectacles) understand.

**Access Requirements:**

If as a result of a disability you have requirements relating to the physical accessibility of the workplace, access to information in different formats or if you require support in the way of aids/adaptations to equipment, it is important that you specify these on the application form.

**1. PERSONAL DETAILS**

Full Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Preferred Title \_\_\_\_\_\_\_\_\_

(e.g. Mr. Mrs.)

Previous surname/s \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Tel. No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Tel. No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth, if under 21 or over 65 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. SECONDARY/FURTHER EDUCATION (Including NVQs)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| School, Colleges etc. | Dates | | Level of  Exams | Subjects, with grades |
| From | To |
|  |  |  |  |  |

**3. HIGHER EDUCATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| University, Polytechnic,  College | Dates | | Qualification/s  (with main subjects) | Grades |
| From | To |
|  |  |  |  |  |

**4. MEMBERSHIP OF PROFESSIONAL BODY, OTHER TRAINING COURSES**

|  |  |  |
| --- | --- | --- |
| Body/Organisation | Membership Level/Qualification | Dates |
|  |  |  |

**5. PRESENT EMPLOYMENT (or most recent if currently unemployed)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Employer (with address & contact  name for reference purposes) | Dates | | Salary & Grade | Notice  Period | Reason for Leaving  this post |
| From | To |
|  |  |  |  |  |  |
| Job Title and Main Duties: | | | | | |

1. **PREVIOUS EMPLOYMENT** (please start with the most recent and work backwards, ensuring that all periods of time are accounted for, and any gaps in employment are explained. **Please note that references may be sought from these employers prior to interview**).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Employer (with address & contact  name for reference purposes | Dates | | Salary  & Grade | Job Title and Main  Duties | Reason for  Leaving |
| From | To |
|  |  |  |  |  |  |

1. **PERSONAL REFEREE**

Please state the name and address of a person whom you have known for at least three years, and who may be approached for a reference. You should quote someone who is currently employed in a position of responsibility. If you are a school leaver you should quote your Head Teacher or Year Head. If you are self-employed you should quote a client or your accountant or solicitor. References will be sought from your current employer and may be sought from your previous employers, but it would be helpful if this personal referee can comment on your suitability for this post.

**It is important that you make this person aware of the possibility that they may be asked to supply a reference for you.**

|  |  |  |  |
| --- | --- | --- | --- |
| Name and  Position/Profession | Address  Including an email address | Tel. No. | Capacity in which you are  known to this person |
|  |  |  |  |

**8. PEOPLE WITH DISABILITIES**

Do you consider yourself disabled? YES NO

(Please see the guidelines for completing the application for employment form)

Please indicate here if you need any particular aids or modification to assist you in attending for interview or carrying out the duties of this post.

1. **CONVICTIONS**

Please give details of any conviction, including the date of conviction and the sentence imposed (a criminal record will not necessarily be a bar to obtaining a position with The Corsham School).

N.B. i) Road traffic offences should be included.

ii) Because of the nature of the work for which you are applying, this post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. Applicants are, therefore, not entitled to withhold information about convictions which for other purposes are “spent” under the provisions of the Act. In the event of employment, any failure to disclose such convictions or cautions or bind over orders could result in dismissal or disciplinary action by the Authority. All convictions or cautions or bind over orders must therefore be disclosed.

|  |  |  |
| --- | --- | --- |
| Conviction | Sentence | Date |
|  |  |  |

**If your application is successful, you will be required to obtain a “Disclosure” from the Disclosure & Barring Service. Employment with The Corsham School will be conditional upon the results of the “Disclosure” obtained, which will indicate your suitability to work with children, young adults or vulnerable adults.**

**10. ADDITIONAL INFORMATION**

a) Do you have regular access to the use of a car? YES NO

b) Do you require a work permit? YES NO

c) The Working Time Regulations place a maximum limit on weekly

hours worked. Will you continue in any other employment, should

you be offered this appointment? YES NO

If YES, how many hours per week?

d) Please state in which publication you saw the advertisement for this post \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please note:

* Deliberate omission or falsification of information could lead to the disqualification of your application or later dismissal, if appointed.
* The appointment is subject to satisfactory evidence of your medical fitness, and the results of a “Disclosure” from the Disclosure & Barring Service, where applicable.
* The information that you supply will be used by The Corsham School for the purpose of administration in relation to prospective, current and past staff. If your application is successful, some of the information will be used to compile your personal file. It may be used and shared with other designated bodies administering public funds, for the prevention and detection of fraud.
* **Data Protection Statement – Data Protection Act 1998 –** The Corsham School has a duty to protect personal information; The Corsham School will process this information in accordance with the Data Protection Act 1998. This information will be stored on computer and manual files.
* Completion and submission of this form is taken as consent to process the information that you have provided.

**Please sign and date below to confirm that the information given is accurate.**

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLEASE RETURN TO THE ADDRESS SHOWN ON THE ADVERTISEMENT

**11. ADDITIONAL INFORMATION**

|  |
| --- |
| 1. Please describe in more detail any experience, skills etc. you have which are relevant to this   job, (referring to the person specification for this post), or any project or voluntary work,  caring duties or hobbies that you feel are relevant.   1. Please give your reasons for applying for this post. |
|  |