

APPLICATION FOR EMPLOYMENT - TEACHING

Post applied for:	Grade/Scale:			
PERSONAL: Please complete all sections to enable your application to be considered				
Surname: Mr/Mrs/Ms/Miss/Other	Other names:			
	Date of Birth:			
If relevant please state other surname used previously:	Daytime ☎ :			
proviously.	Evening :			
Address:	e-mail:			
Postcode:				
DfE Ref. No:	QT Status: YES/NO			
GTC Ref. No:	NPQH: YES/NO			
DCSF Ref. No:	Date Obtained:			
National Insurance No.				
Registered Disabled Applicants who meet the criteria of the personnel specific	ation will be guaranteed an interview			
EMPLOYMENT: Please give details of your present/n				
Post held:	Scale/Allowance: Incremental Point:			
Place of work:	Annual Salary:			
	Full/Part-time: Date passed through threshold:			
Main duties/responsibilities:				
Date appointed:	Date left (if applicable):			
Name and address of present	LEA: Name & address:			
Name and address of present or most recent employer/school:	LEA: Name & address:			
	雷: Fax: e-mail:			

EMPLOYMENT BACKGROUND:

Please detail chronologically all previous experience, unpaid and paid, non-teaching and/

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From Month/Year	To Month/Year	Place of Work/Employer (if applicable)	Scale/Grade	Title/Responsibility

EDUCATION BACKGROUND:

Secondary Education

Name of Institution	From Month/Year	To Month/Year	Qualifications Obtained (please indicate level, awarding body, subjects, grades and dates awarded N.B. certification will be required)		

FURTHER, HIGHER AND PROFESSIONAL EDUCATION:

Name of Institution	From Month/Year	To Month/Year	Qualifications Obtained (please indicate level, awarding body, subjects, grades and dates awarded)

PROFESSIONAL DEVELOPMENT/TRAINING:

(State involvement in the last five years appropriate to your application)

COURSE PROVIDER (i.e., courses you have provided)

Dates of Course	Length of Course	Details of Course

COURSE PARTICIPANT (i.e., Dates of Course	Length of Course	Details of Course
Dates of Course	Length of Course	Details of Course
-	le the UK for more than 3 mor	nths in the last 5 years? Yes / No
If Yes – please give details:		
STATEMENT TO SUPPORT Y	OUR ARRICATION	
STATEMENT TO SOLITORY I	OUN AIT LICATION	
Your application should be accompar	ied by a letter which should be <u>no</u>	longer than two sides of A4 paper, font
point 10, addressing the criteria laid d	own in the person specification.	
VALUING DIVERSITY		
In order to comply with Equal Opportu	inities Legislation, please indicate i	if you have a disability?
YES/NO		
If Yes, do you require any adjustment	s to the selection process?	YES/NO
If Yes, please give details in your app	lication	
DRIVING LICENCE		
Do you hold a current driving licence?)	YES/NO
DATA PROTECTION		
	procedures, and for employment re	ubmitted with this application form, will be ecords if the application is successful. Your ons in the course of their duties.

REFERENCES
Please give the name and address of two people from whom references may be obtained, one of these should be your current employer/Headteacher . If not currently working with children then one reference should be from a previous employer in a role related to this client group, if applicable. Sharples School is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment, therefore references will be sought prior to interview . References from friends or relatives will not be accepted .
1.
Tel:
e-mail:
Postcode:
2.
Tel:
e-mail:
Postcode:
Please sign the declarations below.
REHABILITATION OF OFFENDERS ACT 1974
Owing to the nature and location of the work, the post is exempt from the previous provisions of the above Act, therefore, applicants are not entitled to withhold information about convictions which for other purposes are 'spent' under the provisions of the Act. The Authority will check information provided under this heading.
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.
If you have any convictions, cautions, reprimands or final warnings that are not "protected" as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013 and 2020), then the details of these must be disclosed if you are invited for interview.
Guidance about whether a conviction or caution should be disclosed can be found at <u>Guidance on the Rehabilitation of Offenders Act 1974 and the Exceptions Order 1975 - GOV.UK (www.gov.uk)</u>
If you are invited for interview, please return The Rehabilitation of Offenders Act 1974 – Disclosure Form to the school at least one day prior to interview in a sealed envelope marked "Confidential – Rehabilitation of Offenders Act 1974 – Disclosure Form". If you do not have disclosable convictions, please complete the relevant sections of the Disclosure Form.
In the event of a successful application an offer of employment may be made to you which is conditional upon receipt of satisfactory Disclosure and Barring Service Checks ("DBS Checks") in relation to criminal and child protection matters. Please note that a conviction will not necessarily be a bar to obtaining employment.
By checking the box you consent to a DBS Check(s) being made: □

	hildren. Any offer of em	ployment will be	in a regulated position if you have been subject to checks being carried out in m prohibition order.
Have you at any time been con (including cautions, bind-overs			YES/NO
If YES, please give details in st	rictest confidence:		
Are you disqualified from working sanctions imposed by a regulat			YES/NO
I understand and accept that the Authority will check information under this heading			
Signature:	Date:		
DECLARATION			
I declare that to the best of my understand that should I conce			ained in this form are correct and I
notice as may be appropriate.	•		idition of my contract of service with sacin
notice as may be appropriate. Signature:	Date:		iditori di my contract di service wan sacri

This form, when completed, should be returned to: recruitment@sharplesschool.co.uk