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| **APPLICATION FORM FOR EMPLOYMENT: SUPPORT STAFF** | | | | | | | | | | | | | | | | | |
| Post Applied For: | | | | | |  | | | | | | | | | | | |
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| *Please complete all sections of the application form and return to recruitment@brockington.leics.sch.uk. Add separate sheets if necessary.* | | | | | | | | | | | | | | | | | |
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| Ssdfs **1. PERSONAL DETAILS** | | | | | | | | | | | | | | | | | |
| Title: | | | | | | | | | Surname: | | | |  | | | | |
| All Forenames: | | | | | | | | | Previous Surnames: | | | |  | | | | |
| Address: | | | | | | | | | Home Telephone Number: | | | |  | | | | |
|  | | | | | | | | | Mobile Telephone Number: | | | |  | | | | |
|  | | | | | | | | | Email Address: | | | |  | | | | |
| Post code: | | | | | | | | | National Insurance Number: | | | |  | | | | |
| I confirm that I am eligible to work in the UK: | | | | | | | | YES | | | | | NO | | | | |
| If YES, is this eligibility temporary? | | | | | | | | YES | | | | | NO | | | | |
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| **2. PRESENT EMPLOYMENT** *(if you are currently unemployed, please leave blank)* | | | | | | | | | | | | | | | | | |
| Job Title: | | | | | | | | Telephone Number: | | | | |  | | | | |
| Employer’s Name: | | | | | | | | May we contact you on  this number? | | | | | YES  NO | | | | |
| Address: | | | | | | | | Date Appointed: (dd/mm/yyyy) | | | | |  | | | | |
|  | | | | | | | | Period of Notice: | | | | |  | | | | |
|  | | | | | | | | Salary/Grade: | | | | |  | | | | |
| Postcode: | | | | | | | | Other Pay: | | | | |  | | | | |
| Outline of key duties and responsibilities: | | | | | | | | | | | | | | | | | |
| *Please provide a full employment history in date order, most recent first, since leaving secondary education, including periods of any post-secondary education/training, work experience, part time and voluntary work, as well as full time employment. Give start and end dates, explanation for periods not in employment/training and reasons for leaving employment* | | | | | | | | | | | | | | | | | |
| **3. PREVIOUS EMPLOYMENT** | | | | | | | | | | | | | | | | | |
| Job Title/Position | | Employer’s name/address | | | | | | | | Dates (dd/mm/yyyy) | | | | | Reason for Leaving | | |
|  | |  | | | | | | | | From | | To | | |  | | |
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| **4. BREAKS IN EMPLOYMENT** | | | | | | | | | | | | | | | | | |
| Dates (dd/mm/yyyy) | | | |  | | | | | | | | | | | | | |
| From | To | | | Reason for break in employment | | | | | | | | | | | | | |
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| **5. QUALIFICATIONS** *(Secondary/Further/Higher Education & Qualifications)* | | | | | | | | | | | | | | | | | |
| Name of School/College/ University | | | Dates (dd/mm/yyyy) | | | | | | | | Qualifications gained/pending with grades and dates | | | | | | |
|  | | | From | | | | To | | | |  | | | | | | |
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| **6. RELEVANT PROFESSIONAL DEVELOPMENT & COURSES in last 5 years** | | | | | | | | | | | | | | | | | |
| Organising Body | | | Brief Details of CPD/Course/Award | | | | | | | | | | | Date From | | | Date To |
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| **7. MEMBERSHIP OF PROFESSIONAL BODIES/ASSOCIATIONS** | | | | | | | | | | | | | | | | | |
| Name of Professional Body/Association | | | | | Membership Level | | | | | | | | | | | Date of Membership | |
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| **8. SUMMARY OF EXPERIENCE, SKILLS, KNOWLEDGE AND COMPETENCIES** | | | | | | | | | | | | | | | | | |
| *Please detail your relevant experience, skills, knowledge and competencies which make you suitable for the post. Give examples of what you have done in your work/home life to fulfil the person specification.* | | | | | | | | | | | | | | | | | |
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| **9. REFERENCES** | | |
| Title:       Name: | Title:       Name: | |
| Address | Address | |
| Postcode | Postcode | |
| Email Address | Email Address | |
| Telephone Number | Telephone Number | |
| Title/Position | Title/Position | |
| Relationship to Applicant | Relationship to Applicant | |
| *Please note that an offer of employment is subject to satisfactory references, which will be applied for at the shortlisting stage. One reference should be from your present employer and one reference should be from your most recent previous employer. If you do not have a current or previous employer, references will be required from other professionals.* | | |
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| **10. RELATIONSHIPS** | | |
| Are you, to your knowledge, related to any employee or governor at Brockington College?  Yes  No  If so, please give details: | | |
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| **11. CRIMINAL CONVICTIONS AND CAUTIONS** | | |
| Do 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) by SI 2013 1198 available at [www.gov.uk](http://www.gov.uk).**?**  Yes  No  If ‘yes’, please provide the details in a sealed envelope and attach to your form including date, court and nature of offence.  Have you ever been known to any children’s services department or to the police as being a risk or potential risk to children?  Yes  No  Have you been the subject of any disciplinary investigation and/or sanction by any organisation due to concerns about your behaviour towards children?  Yes  No  The college is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment. The post is subject to an enhanced DBS disclosure.  **Declaration: I have read and understood the above statement. If I have any convictions or cautions to declare, I will supply written details of them in a separate envelope marked ‘private and confidential’ with this application.**  **Signature:**       **Date** (DD/MM/YYYY)**:** | |
| **12. DATA PROTECTION ACT** | |
| The information you supply when submitting this application form will be held for monitoring and evaluation purposes and in connection with any future contact. This information will be kept for a maximum of 18 months from the last contact. When you sign and return this form you are giving your permission to process and hold the information you have supplied, including any information you consider to be personal and sensitive. If your application is unsuccessful, the form will be held for up to 12 months and then destroyed. | |
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| **13. DISABILITIES / HEALTH CONDITIONS** | |
| The Equality Act 2010 defines disability as*‘a physical or mental impairment which has a substantial and long term adverse effect on the ability to carry out normal day to day activities’.*  **Do you consider yourself to be disabled?**  Yes  No  Please indicate below if you require any reasonable adjustments, due to a disability or health condition, to enable you to attend interview, or which you wish us to take into account when considering your application. | |
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| **14. DECLARATION** | |
| I declare that the statements submitted in this application are true, correct and accurate and that I have not omitted any facts which may have any bearing on my application. By signing this form, I agree to Brockington College using this information to consult any third parties or external organisations for the purposes of confirming and/or clarifying such information.  I am aware that providing false information is an offence and could result in my application being rejected or in summary dismissal if employment has been offered, with possible referral to the police.  I agree that the information provided here may be processed in connection with recruitment purposes and I understand that an offer of employment may be withdrawn or disciplinary action may be taken if information is not disclosed by me and subsequently comes to the organisation’s attention.  I agree to inform the organisation within 24 hours if I am subsequently investigated by any agency or organisation in relation to concerns about my behaviour towards children or young people.  I understand that if I do not tell you about any relationships with any employees or governors of Brockington College, or I neglect to tell you about any unspent criminal convictions including cautions, reprimands, warnings or that I am under investigation or have pending prosecutions and this is discovered after appointment, I could be dismissed without notice.  I understand that the information contained on this form, the results of the DBS check and information supplied by third parties may be supplied by the organisation to other persons or organisations in circumstances where this is considered necessary to safeguard children.  I can produce the original documents of my qualifications prior to any appointment.  I understand that any canvassing, directly or indirectly, will be a disqualification.  I understand that I am required to provide documents proving eligibility to work in the UK prior to any appointment.  I am prepared to undergo a medical examination prior to any appointment.  I attach a letter of application in support of this form along the format prescribed in the job details supplied to me.  Please indicate any dates you are unable to attend for interview:  **Signature:**       **Date** (dd/mm/yyyy**:** | |

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| **Monitoring Section** |

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| *Please provide details below. These will not form any part of the shortlisting process and will only be used to monitor equal opportunities.* | | | | |
| **Post Applied for** |  | | | |
| **How would you describe your ethnicity?** | | | Prefer not to state | |
| **White or White British**  British  Irish  Any other white background  (please write in below) | | **Mixed**  White and Black Caribbean  White and Black Asian  White and Asian  Any other Mixed background  (please write in below) | | **Asian or Asian British**  Indian  Pakistani  Bangledeshi  Any other Asian background  (please write in below) |
| **Black or Black British**  Caribbean  African  Any other Black background  (please write in below) | | **Chinese or Other Ethnic Group**  Chinese  Any other Ethnic Group  (please write in below) | | **Gypsy/Traveller**  Irish Traveller  Romany Gypsy  Any other background  (please write in below) |
| **My sex is**  Female  Male  Prefer not to state | | | | |
| **My date of birth is** (dd/mm/yyyy)**Age** | | | | |
| **The Equality Act 2010 defines disability as** *‘a physical or mental impairment which has a substantial and long term adverse effect on the ability to carry out normal day to day activities’.*  **I consider myself to be**  Disabled  Non-Disabled  Prefer not to state | | | | |
| **My religion is:**  Buddhist  Christian (all denominations)  Hindu  Jewish  Muslim  Sikh  None  Prefer not to state  Other (please specify) | | | | |
| **My sexual orientation is:**  Bi-sexual  Gay  Heterosexual  Lesbian  Transgender  Prefer not to state  Other (please specify) | | | | |
| **My nationality is:** | | | | |
| **Where did you see the vacancy advertised?** | | | | |
| **Your Name** | | | | |