

Post:

### 1. Personal Details

Title:

Surname:

First Name(s):

Previous Surname:

Home Address:

Postcode:

Telephone (home):

Telephone (work):

Telephone (mobile):

Email (home):

Email (work):

Date of Birth (dd/mm/yyyy):        /    /

National Insurance Number:

Do you require a work permit to work in the UK?        Yes:  No:

If 'yes' and applicable, when does your permit expire (dd/mm/yyyy)?        /    /

Date when available to start:        /    /

### 2. Current or most recent employment

Full name of employer:

Employers telephone number:

Position held:

Salary:

Other allowances:

Full-time/Part-time:

Dates from - to:        /    / -    /    /

Reason for leaving:

Main areas of responsibility:

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### 3. Employment History

Please start with the most recent. You should account for all activities including paid employment or voluntary work. Continue on a separate sheet if required.

JOB TITLE (OR NATURE OF ACTIVITY IF NOT EMPLOYMENT)	NAME AND ADDRESS OF EMPLOYER (IF APPLICABLE)	DATES (FROM – TO)	BRIEF DESCRIPTION OF DUTIES / AREAS OF RESPONSIBILITY
		/ / - / /	
		/ / - / /	
		/ / - / /	
		/ / - / /	
		/ / - / /	

### 4. Statement of Application

Please complete a supporting statement and insert it here or attach it to your application form. Short-listing will be undertaken with reference to the criteria in the Person Specification. You should set out your reasons for applying for this post and demonstrate how your qualifications, experience, skills and qualifications support your application:

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**5. Other Education, Training and Development****5A. SECONDARY AND FURTHER EDUCATION**

SCHOOL/COLLEGE (GIVE ADDRESS)	DATES ATTENDED (MM/YYYY – MM/YYYY)	QUALIFICATION DETAILS			
		LEVEL	SUBJECT(S)	GRADE(S)	YEAR OF AWARD
	/ - /				
	/ - /				
	/ - /				
	/ - /				

**5B. HIGHER EDUCATION AND PROFESSIONAL QUALIFICATIONS**

SCHOOL/COLLEGE/ AWARDING INSTITUTE	DATES ATTENDED (MM/YYYY – MM/YYYY)	QUALIFICATION DETAILS			
		LEVEL	SUBJECT	GRADE	YEAR OF AWARD
	/ - /				
	/ - /				
	/ - /				

Proof of qualifications will be required prior to appointment. Grades must be listed for all qualifications.

**5C. COURSES ATTENDED**

Please provide details of additional courses relevant to your application that you have attended in the last three years.

COURSE TITLE	ORGANISING / ACCREDITING BODY	DATE
		/ /
		/ /
		/ /

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## 6. References

Please supply the names of two people other than relatives from whom references can be sought. One should relate to your current or most recent employment. If you are unable to provide an employer as a referee, please provide details of a person who knows you, other than in a personal capacity:

### REFEREE 1

Forename(s):

Surname:

Position:

Professional Relationship:

Period Known:

Name of organisation:

Address:

Postcode:

Telephone:

Email:

### REFEREE 2

Forename(s):

Surname:

Position:

Professional Relationship:

Period Known:

Name of organisation:

Address:

Postcode:

Telephone:

Email:

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## **7. Additional Information and Declarations**

### **7A. SUPERANNUATION**

Do you contribute to a Pension Scheme? Yes:  No:

### **7B. RELATIONSHIPS**

Are you related to any school Employee or Governor? Yes:  No:

If 'yes, please provide details here:

### **7C. DISCLOSURE OF CONVICTIONS**

The position for which you are applying involves substantial contact with children and is therefore exempt from the Rehabilitation of Offenders Act 1974 and all subsequent amendments (England and Wales.) This means that for this position, you are not entitled to withhold any information about police cautions, 'bind-overs' or any criminal convictions, including any that would otherwise be considered "spent" under the Act and you should declare any such information as follows:

Have you ever been convicted of any offence or 'bound-over' or given a caution? (please tick accordingly) Yes:  No:

If 'yes' please give details:

Offence:

Date:             /       /                          Sentence:

### **7D. DISCLOSURE AND BARRING SERVICE (DBS)**

Please give details of your police check with the DBS:

Police Check Date:             /       /                          DBS Number:

## **8. Declaration Statement**

The School is under a duty to protect the public funds it administers and to this end may use information you have provided in your application form for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for these purposes.

Please sign and date this form if you agree with the following statement:

For the purposes of the Data Protection Act 1998, I consent to the information contained in this form and any information received by or on behalf of the school relating to the subject matter of this form, being processed by them in administering the recruitment process.

I declare that the information I have given on this form and attachments is correct and true and agree that this forms part of the basis of my engagement and may be used for registered purposes under the Data Protection Act 1998. I authorise Isleworth & Syon School to check the information supplied and understand that providing misleading or false information or omitting any relevant information, could result in the withdrawal of any offer of appointment or my dismissal at any time in the future and possible criminal conviction.

Signature: \_\_\_\_\_ Date:   /   /   

For online / electronically completed applications, by ticking the following box and submitting your application, you agree to the terms of the declaration above:

All candidates applying for employment via email/online will be required to sign and date this form, if invited to attend interview.

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## 9. Equal Opportunity Monitoring Information

We are committed to equality of opportunity and are keen to monitor the effectiveness of our recruitment practice. Any information provided on this form will be treated in the strictest confidence and will only be used for the purpose of recruitment monitoring.

Please tick or complete as appropriate.

Name:

Post applied for:

School / Service:

### GENDER

Male:

Female:

### AGE GROUP

Under 20 years:       20 - 29 years:       30 - 39 years:

40 - 49 years:       50 - 59 years:       60 + years:

### ETHNIC ORIGIN

How would you describe your ethnic origin? (please tick one.)

#### White

- White British
- White Irish
- White European
- Any Other White background

#### Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background

#### Black or Black British

- Black Caribbean
- Black African
- Any other Black background

#### Dual Heritage

- White and Asian
- White and Black African
- White and Black Caribbean
- Any other dual background

#### Other Ethnic Groups

- Chinese
- Any other ethnic group

### PEOPLE WITH DISABILITIES

The Disability Discrimination Act 1995 defines a person as disabled if they have a "physical or mental impairment which has substantial or long-term adverse effect on a person's ability to carry out normal day-to-day activities."

Do you consider yourself to have a disability?    Yes:  No:

**Advertisement:** Where did you see this post advertised?