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| Application for Employment (Support Role) | | |
| The school values diversity and is striving to be an Equal Opportunity Employer | | |
| We are committed to safeguarding and promoting the welfare of children, young people and vulnerable adults and expect all staff and volunteers to share this commitment  Please complete in black ink or type | | |
| Post applied for: |  | School/Department: |
| **Personal** | | |
| Surname: Dr/Mr/Mrs/Miss/Ms  Previous name(s): |  | Forename(s): |
|  | | |
| Address:  Postcode: |  | Date of Birth: |
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| E-mail address: |
|  |
|  | Contact numbers:  Daytime:  Evening:  Mobile: |
| NI Number: |  |

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| **Education, job related qualifications & specialised training**  Please ensure that you start this section on a new page | | | |
| School/College | Qualifications/training  Proof of job related qualifications will be required | From  month/year | To  month/year |
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| **Present/most recent appointment** | | | |
| Job title: |  | Employer's name & address: | |
| Start date: |  |
| Leaving date: |  |
| Weekly wage/salary: |  |
| Notice required: |  | Email address: | |
| Purpose of job: | | |

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| **Employment background**  Please detail chronologically all previous work experience, unpaid and paid, voluntary, non-teaching as well as teaching, since leaving secondary/further education and explanations for any gaps (if applicable) | | | | | | | | | |
| From month/  year | To month/  year | Place of work/employer (if applicable) | Scale/  grade | | | Title/  responsibility | | | Reason for leaving |
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| Have you ever been dismissed by any of the above employers? | | | | | | | | | |
| If Yes, further details may be required from you. **YES** | | | |  | **No** | |  | (please tick) | |

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| Explanation of Gaps |
| Please explain here any gaps in employment, education or training since leaving full time education. |

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| **References \***These will be sought in advance unless indicated | | | | | | | | | | | |
| Please give the name and address of two persons from whom references may be obtained, **one of these should be your current employer/Head Teacher**. If not currently working with children or vulnerable adults, then one reference should be from a previous employer in a role related to this client group, if possible. **References from friends or relatives will not be accepted**. | | | | | | | | | | | |
| Employer |  | Non-Employer |  | (please tick) |  | Employer | |  | Non-Employer |  | (please tick) |
| Name: | | | | |  | Name: | | | | | |
| Address: | | | | |  | | Address: | | | | |
| Telephone No: | | | | | Telephone No: | | | | |
| Email: | | | | |  | | Email: | | | | |
| May we request in advance? Yes / No | | | | |  | | May we request in advance? Yes / No | | | | |

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| **Relevant skills, knowledge and experience**  Please ensure that you start this section on a new page |
| Please use this page to show how you meet the items on the Person Specification.  (Continue on an additional sheet if necessary) **Please note no more than two A4 sides of paper** |
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| **Declaration**  I declare that, to the best of my knowledge and belief, all statements contained in this form are correct and I understand that, should I conceal any material fact, I will, if engaged, be liable to the termination of my contract of service with such notice as may be appropriate. | | | |
| **Signature:** |  | **Date:** |  |

Please ensure that you start this section on a new page

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| **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 Trust will check information provided under this heading.** | | | | | |
| Have you ever been convicted of any criminal offence (including cautions, bind-overs and any pending prosecutions)? | **Yes** |  | **No** |  |  |
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| Are you disqualified from working with children or vulnerable adults or subject to any sanctions imposed by a regulatory body i.e. GSCC? | **Yes** |  | **No** |  |  |
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| In order to comply with our **Diversity Policy**, **Yes**  please indicate if you have a disability? | |  | **No** |  |  |
| If YES, do you require any adjustments to the selection process? **Yes** | |  | **No** |  |  |
| If YES, please give details in your application | | | | | |
| Current legislation means that you will need to provide documentary evidence (for example National Insurance Number) showing your entitlement to work in the UK. You should be aware that you will be asked to provide this prior to appointment. | | | | | |
| Are you related to any member of the Trust, School, or Governing Body? | | | | | |
| If Yes, please give details **Yes** | |  | **No** |  |  |
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| **Data Protection Act**  In accordance with the Act, you should be aware that the personal details submitted with this application form will be used only for selection and interview procedures and for employment records if the application is successful. Your information will be stored securely and only accessible to relevant persons in the course of their duties. | | | | | |
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| When completed, your application should be returned to:    Mr C Bramwell  Headteacher  The Westleigh School  Westleigh Lane  Leigh WN7 5NL or via Email: [enquiries@admin.westleigh.wigan.sch.uk](mailto:enquiries@admin.westleigh.wigan.sch.uk) | | | | | |