Your guide to completing the form

Before you begin:

Read the advertisement and any additional supporting information provided, for example:

- The job description, which lists the tasks you will be expected to carry out and describes how the job fits in with other employees.
- The person specification, which details the experience, skills and abilities needed for the role. It is vital that your application demonstrates how you met these requirements.

In order to improve your chances of being selected, refer to the enclosed information, and use specific examples from your experience. It is in your interest to complete the application form in such a way as to maximise your chances of being selected.

Supporting statement:

Please complete this in the section 'Reasons for applying' on page 4. Remember to relate your skills, knowledge and experience to the job description and person specification when completing this section.

Important notes:

- If you are applying for a position as job share, please state on your application form why you wish to job share and how you think the job share will work. If you are applying with a partner for a job share post, please ensure you state that person's name.
- Please complete this form in black ink (or typed format), and ensure that it is legible. You may use the continuation sheet on page 6, and attach more sheets if necessary, ensuring you mark each sheet with your full name and the vacancy reference number.
- Please ensure that you have read and understood the declaration on page 5, and that you have signed and dated your completed application form before returning it.
- You may find it useful to take a copy of your completed application form for your own personal records.



Application Form – Teaching

ALL INFORMATION WILL BE TREATED IN THE STRICTEST CONFIDENCE

Please ensure you read the guidance notes attached before filling in this form. If you are completing it online, do **not** complete it in upper case. If you are completing the form by hand, please initial each page.

Your application (All fields with * MUST be completed)

*Job title:	*Vacancy reference number:			
*How did you hear of this post?	How did you hear of this post?			
*Name of school (if applicable):				
Or, please tick: NQT application Heat	adteacher application			
*Have you applied to us before? Yes: No	b: If so, which position, and when?	?		
Personal details (All fields with * MUS	T be completed)			
*Title: Mr 🗌 Ms 🗌 Miss 🗌 Mi	rs Other (please specify):			
*Forenames:	*Surname:			
*Permanent address: (for correspondence)				
*Postcode: Email a	ddress:			
Phone numbers: *Home	Work:	Mobile:		
*Preferred means of contact:		May we contact you at work?	Yes: No:	
*Asylum and Immigration Act (All fields in this section MUST be completed)				
Before you commence working, you MUST provide e receive further guidance.	vidence to demonstrate your right to be in or v	work in the United Kingdom. If you are app	pointed to a post you will	
Are you eligible to work in the UK? Yes:	No:			
Is this subject to a Work Permit or Visa? Yes:	No:			

This section needs to be filled in by Newly Qualified Teachers (NQTs)

Please give the date that you successfully completed the National Skills Tests. Please put N/A in the boxes that are not applicable to your Qualified Teaching Status. If you have not yet passed the required tests, please give the date of your next test.

Numeracy - Date
ICT - Date
Literacy - Date
Have you started your induction period? Yes: No:
If yes, date commenced:
School/LA:



	Name:
Your application (Please fill in all the applica	ble sections)
Are you recognised by the DCSF as a qualified teach	ner in this country? Yes: No:
DCSF number:	Date when qualified:
GTC registration number:	Age range you are qualified to teach:
Have you successfully completed a period of probati as a qualified teacher in this country as required by t	
	posts must have at least a Grade C in GCSE English and Maths, or have reached the equivalent nber 1979, and want to teach primary pupils, you will also need at least a GCSE Grade C (or w you meet these criteria.
Teaching and work experience (PI	ease answer all questions relevant to you application)
CURRENT OR LAST POSITION OF EMPL	OYMENT
Name of school/organisation:	
Start date:	End date (if applicable):
Ages taught (if applicable):	
Point of Scale:	Salary:
Additional allowances (if applicable):	
Brief description of duties/responsibilities:	

PREVIOUS TEACHING EXPERIENCE (continue on the separate sheet provided on page 6, if necessary)

Please provide details of full- and part-time paid teaching experience, including periods before qualification if relevant. NQTs applying for their first position should include college teaching practices.

School/LA	Dates (from/to)	Job title and brief description of duties

Name:

NON-TEACHING EXPERIENCE (continue on the separate sheet provided on page 6, if necessary)

This should include any employment after the age of 18, i.e. clerical, social, industrial (excluding casual employment).		
Name and address of employer	Dates (from/to)	Job title and brief description of duties

COURSES ATTENDED (continue on the separate sheet provided on page 6, if necessary)

Please include details of all courses relevant to your application.

Course title	College/organiser of course	Date and length of course

Education and qualifications (Please fill in all the applicable sections)

CURRENT STUDIES

University/college/institute (state country if non-UK)	Date started (mm/yy)	Expected end (mm/yy)

HIGHER AND FURTHER EDUCATION

University/college/institute (state country if non-UK)	Examinations passed and education level (e.g. Diploma, Degrees)		Date finished (mm/yy)

Name:

SECONDARY EDUCATION AND EXAMINATION RESULTS

Name of school	Examinations passed and education level (e.g. GCSE/O/A/GNVQ)	Grade	Date (mm/yy)

Reason for applying (continue on the separate sheet provided on page 6, if necessary)

Please use the space below to demonstrate how you meet the **requirements of the person specification**, giving examples, where appropriate. Also include further information about yourself that you feel is relevant. Please ensure you read the attached guidance notes before completing this section.

Name:

References (All fields in this section MUST be completed)

Please give the names and addresses of two individuals, not related to you, from whom we may obtain references. At least one of them MUST be a professional reference. If you are working then one of these must be your current employer. However, if you are a student or have been out of work for a period of time then teachers or a previous employer will be sufficient. Please remember that the referees you give should be able to comment on your ability to perform the job for which you are applying. If you do not provide us with two full references, the progression of your application form might be affected. NQTs should include their initial teacher and a successful teacher practice school.

Name:	Name:
Title (Mr, Ms, Miss, Mrs, etc)	Title (Mr, Ms, Miss, Mrs, etc)
Job title/status:	Job title/status:
Relationship:	Relationship:
Address:	Address:
Postcode:	Postcode:
Telephone:	Telephone:
Fax:	Fax:
Email:	Email:
May we contact this referee prior to interview? Yes: No:	May we contact this referee prior to interview? Yes: No:

Rehabilitation of Offenders Act 1974 (All applicants MUST answer all questions in this section)

Because of the nature of the work for which you are applying this post is exempt from the provision of Section 4 (2) of the Rehabilitation of Offenders Act 1974 in accordance with the Rehabilitation of Offenders Act 1974 (Exceptional) Order 1975 as amended by the Rehabilitation of Offenders Act 1974 (Exceptions) (Amendment) Order 1986. Applicants are therefore not entitled to withhold information about convictions, cautions or bind-over orders which for any other purposes are "spent" under the provisions of the Act, and, in the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action by The Trust. Any information given will be completely confidential. Having a criminal record will not necessarily bar you from working with us. This will depend on the nature of the position and the circumstances and background of your offence.

Please answer the following questions:

Have you been convicted of a criminal offence in the past?	Yes: No: (if yes, please attach details, including dates and reference numbers)
Signed (see Note):	Date:
Have you previously used or do you currently use any othe	er forename(s), surname(s) or aliases (including maiden names)? Yes: No:
If yes, please state name(s) and dates used:	

Declaration (To be signed by all applicants)

I have read and understood the information contained in this application form. I declare that all information provided in this application form is true and accurate to the best of my knowledge. I understand that omissions or incorrect statements will disqualify me, or if appointed, I will be liable to be dismissed. This declaration constitutes part of the terms of contract if I am appointed.

Signed (see Note):

Date:

Print name:

Note: If you e-mail this form to us (i.e. you can't sign it) then it is assumed that you declare that the information on this form, and your answers to the section on the Rehabilitation of Offenders Act 1974, are true and accurate.

Continuation sheet

Name:

If you need additional space to answer any of the questions, please use the space below. If you need to use any continuation sheets please remember to write the page number at the top of each sheet.

MONITORING EQUAL OPPORTUNITIES

Name:

The Learning Trust is committed to being an equal opportunities employer. The Learning Trust does not discriminate on the basis of race, religion or belief, colour, sex or sexual orientation, age, physical or mental disability, marital status, nationality, ethnic or national origin. All matters related to employment are decided on the basis of qualifications, merit and business need.

The Monitoring information section will be removed prior to shortlisting and will not be used for selection purposes. It will only be used for statistical monitoring purposes to ensure all applicants receive the same consideration and are treated fairly when applying for jobs.

Please complete the Equal Opportunities Monitoring form to enable us to monitor the effectiveness of our equal opportunities policy in regards to our applicants. **Information will be treated in strict confidence and used only for monitoring purposes and will not form any part of the assessment process.** Data is collected in accordance with the requirements of the Data Protection Act and the Code of Practice issued by the Chartered Institute of Personnel and Development.

Disabilities Disclosure Statement

The Learning Trust is committed to providing a service that is inclusive of diversity and equality. In order for us to provide such a service, we require you to complete the following declaration relating to disabilities. If you do not consider yourself to have a disability, please tick the box at the end of the next section.

The Learning Trust has a duty under Part 3 of the Disability Discrimination Act 1995 to make 'reasonable adjustments' for people with disabilities who want to access our services. To do this, it is important that you let us know if you have a disability so that we can make reasonable adjustments to meet your needs and ensure you can use our services.

In order to make these adjustments, some information regarding your disability may have to be disclosed to various members of staff or our partners. Detailed information about the nature of your impairment or medical information will not be passed on unless it is relevant to making reasonable adjustments.

You can request that no information about your disability is passed on to others, or you can request that information is restricted to certain people. However, you should be aware that if you do this it could limit the types of adjustments our partners or we are able to make.

You should also be aware that even if you have asked for information about your disability not to be passed on to any other members of staff or partners, there could be certain instances where this may still have to be done for reasons of health and safety, emergencies or public policy.

I do not consider myself to have a disability:	
I agree to information regarding my disability to be passe	d on: Yes: No: Restricted:
If you have ticked 'restricted', please list those to whom who you agree the information can be passed	



Monitoring Equal Opportunities

Please complete the Equal Opportunities Monitoring form to enable us to monitor the effectiveness of our equal opportunities policy in regards to our applicants. **Information will be treated in strict confidence and used only for monitoring purposes and will not form any part of the assessment process.** Data is collected in accordance with the requirements of the Data Protection Act and the Code of Practice issued by the Chartered Institute of Personnel and Development.

Personal and post details

lame:				Date of birth:				Sex:	Male:	Female:
Post applied for:			١	Vacancy reference number:						
Marital status (pl	ease tick)									
Single:	Civil Partnershi	p:	١	Nidow/Widow	ver:		Sepa	arated	:	
Married:	Living with Partner:			Divorced:			Do n	ot wis	h to disclose:	
Disability (please tick)										
Under the Disability Discrimination Act 2005 the definition includes anyone with a "physical or mental impairment which has a substantial, long term, adverse effect on their ability to carry out normal day to day activities". This can include cancer or other such long term illnesses.										
Under this new definition do you consider yourself to have a disability? Yes: No: Do not wish to disclose:										
If yes, which of the following	best describes yo	our disability:								
Speech:		Visual (not including wearing glasses or contact lenses):								
Hearing:		Co-ordination, dexterity or mobility:								
Mental health:		Other physical or mental conditions (please specify):								
Learning difficulties:										
Religion of belief (please tick)										
Catholic:		Hindu:		Jain	:					
Church of England:		Buddhist:		No r	eligion:					
Jewish:		Muslim:		Othe	er:					
Orthodox Jewish/Charedi:		Sikh:		I	Please spe	ecify:				
Do not wish to disclose:										

Caring responsibilities (please tick)

Do you have a carer	responsibility for anyone?	Yes:	No: Do not wish to disclose:
If yes, are they:	Adults:	Sick:	Disabled: Elderly:
	Children under 16:	Sick:	Disabled:



			Name:			
Sexual orientation	ON (please tick)					
Are you? Heterosexual	l: 🗌 Lesbian: 🗌	Gay: 🗌	Bisexual: Do not wish to	o disclose:		
Transgendered	(please tick)					
Are you Transgendered/Transsexual? Yes: No: Do not wish to disclose:						
Ethnic group (plea	ase tick)					
WHITE			MIXED			
British:	White and Black Caribbean:					
Irish:	White and Black African:					
Other: ¹	White and Asian:					
Please specify:			Any other Mixed background:			
			Please specify:			
BLACK OR BLACK B	RITISH		ASIAN OR ASIAN BRI	TISH		
Caribbean:			Indian:			
African: ²		Pakistani:				
Please specify:			Bangladeshi:			
Any other Black background:	:		Any other Asian background:			
Please specify:			Please specify:			
CHINESE AND OTHE	ER					
Chinese:			Do not wish to disclose:			
Any other background: ³						
Please specify:						

NOTES:

- 1. Turkish, Turkish Cypriot, Traveller of Irish Heritage, Albanian, Greek/Greek Cypriot, Gypsy/Roma, White Western European, White Eastern European, any other White.
- 2. Angolan, Congolese, Ghanaian, Nigerian Sierra Leonean, Somali, Sudanese, any other Black African.
- 3. Afghan, Kurdish, Latin/South/Central American, Vietnamese, any other ethnic group.