**SUPPORT STAFF APPLICATION FORM**

The information requested in this form is important in assessing your application. Please complete this form in full. **Unless stated otherwise, CVs are not acceptable.**

**Please write/type in black ink and ensure that you save this document before sending**

|  |  |
| --- | --- |
| **Post Applied For:** |  |
| If the post is full-time, would you be prepared to consider working on a job-share basis? | **YES / NO** (delete as applicable) |
| If appointed when can you start: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **1. Personal Details** | | | |
| **Surname** |  | | |
| **First Names:** |  | | |
| **Title** (select as appropriate) | Mr / Mrs / Miss / Ms / Dr / Other: (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **Maiden name or previous names** |  | | |
| **Address** (inc. postcode) |  | | |
| **Email Address** |  | | |
| **National Insurance number** |  | | |
| **Home telephone number** |  |  |  |
| **Mobile telephone number** |  |  |  |
| **Are you eligible to work in the UK?:** | **YES / NO** (delete as applicable) |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **2. Present Post** | | | |
| **Present Post (title):** |  | **Date Appointed:** |  |
| **Current Salary:** Include responsibility points |  | **Name & Address of present workplace:** |  |
| **Brief description of duties undertaken in present post** |  | | |
| If current workplace is a school please answer sub-sections i, ii & iii | | | |
| **i) Type of School:** |  | **ii) Age range** |  |
| **iii) NOR:** |  |  | |

|  |
| --- |
| **3.Career History** |
| Please give details of ALL full and part-time work including particulars of ALL paid and unpaid employment or experience after the age of 18. For example, commercial experiences, raising family, youth work, voluntary work, work overseas. Complete the columns starting from the present date. Please leave NO gaps. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **B. Non-Teaching Positions** | | | | | |
| **Dates FROM:** (M)/(Y) **TO:** (M)/(Y) | **Job title, employer, address** | **Brief description of duties undertaken** | **Salary**  Include responsibility points | **PT/FT**  State proportion | **Reason for leaving** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **B. University, College and other institutions**  Give dates and state whether full-time or part-time courses | | | | | | | | |
| **Name of institution:** | | | | | **From:** (Month / Year) | | **To:** (Month / Year) | |
| **1.** | |  | | |  | |  | |
| **2.** | |  | | |  | |  | |
| **3.** | |  | | |  | |  | |
| **4.** | |  | | |  | |  | |
| **Degree/Diploma/Title:** | | | **P.T./F.T.** | **Subjects** (main & subsidiary) | | **Hons** (with class) **or pass grade** | | **Date of award** |
| **1.** |  | |  |  | |  | |  |
| **2.** |  | |  |  | |  | |  |
| **3.** |  | |  |  | |  | |  |
| **4.** |  | |  |  | |  | |  |
|  | | | | | | | | |
| **C. Secondary Education** | | | | | | | | |
| **Name of institution** (give dates) | | | | | | | | **Date** |
| **1.** |  | | | | | | |  |
| **2.** |  | | | | | | |  |
|  |  | | | | | | |  |
| **Academic qualifications** (give subjects and grades) | | | | | | | | **Date** |
|  | | | | | | | |  |
|  | | | | | | | |  |
|  | | | | | | | |  |
|  | | | | | | | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **C. Breaks in Employment History** | | | | |
| If you have had any breaks in employment since leaving school, give details of these periods and your activities during these times e.g. unemployment, raising family, voluntary work, training, long periods of sickness etc. | | | | |
| **Employment breaks** | | | | **Dates** |
|  | | | |  |
|  | | | |  |
| **D. In-Service Training & Development** | | | | |
| Give details of relevant courses and training undertaken in the last five years. | | | | |
| **Dates and duration** | **Title of course / training** | **Name of provider** | **Qualification obtained (if any)** | |
|  |  |  |  | |
|  |  |  |  | |
|  |  |  |  | |
|  |  |  |  | |
|  |  |  |  | |
|  |  |  |  | |
|  |  |  |  | |
|  |  |  |  | |
|  |  |  |  | |

|  |  |  |
| --- | --- | --- |
| **4. References** | | |
| Please give the names, addresses and emails of two employment referees who can be consulted regarding your professional ability for the post. One of the referees must be your present employer. If not, we reserve the right to request one. Reference requests will be made by email and will be taken up before an offer of employment is made. It is the candidate’s responsibility to ensure that referees are made aware that they will be contacted and be made aware of the timescales for providing references. | | |
| **1.** | Name :  Title :  Relationship to applicant : | Address :  Email :  Telephone number : |
| **2.** | Name :  Title :  Relationship to applicant : | Address :  Email :  Telephone number : |

|  |
| --- |
| **5. Applicant Statement** |
| **Using the Job Description & Person Specification:**   * Please pick out those aspects of your experience or skills that are relevant to this post. * Using examples, explain how your ability, skills and knowledge match those required for the appointment. * Please consider experiences in any previous employment and also other interests outside work, such as at home, in the community or through voluntary activities. * Governors are particularly interested in how you would apply your knowledge and skills to their school.   **Please keep your statement to 1 side of A4, minimum font size Arial 10 in the box provided.** |

|  |
| --- |
|  |

|  |  |  |
| --- | --- | --- |
| **6. Safety and Welfare of children** | | |
| Have you ever been the subject of any allegations in relation to the safety and welfare of children, either substantiated or unsubstantiated? | | Yes       No |
| If you have answered ‘YES’ to the above question, you must supply details on a separate sheet of paper, place it in a sealed envelope marked confidential and attach it to your application form. | | |
| I have attached details as requested. | | Yes       No |
| **Disciplinary Record** | | |
| Are you (or have you ever been) dismissed from a teaching post for alleged misconduct or incompetence or resigned in the face of such allegations? | | Yes       No |
| If ‘YES’, please give details: |  | |
| Have you ever received a final warning for misconduct or incompetence or have you received a lesser warning which has not time expired at the point of making this applications? | | Yes       No |
| If ‘YES’, please give details: |  | |
| I can confirm that I have not been barred from working with children: | | Yes       No |
| If ‘NO’, please give details: |  | |

|  |  |
| --- | --- |
| **7. Rehabilitation of Offenders Act 1974 and Safeguarding Vulnerable Groups Act 2006** | |
| Under the Rehabilitation of Offenders Act (ROA) job applicants are only required to declare criminal convictions which are not considered “spent” under the Act.  Please note that in accordance with the Safeguarding Vulnerable Groups Act 2006, all roles in schools are now classified as “regulated”. This means that they are all exceptions to the ROA and therefore you are required to declare any convictions (including bind over and cautions) regardless of whether or not they would be considered spent in other circumstances.  Please read the guidance notes before completing this section. | |
| Have you ever been convicted of a criminal offence? | Yes       No |
| Are there any alleged offences outstanding against you? | Yes       No |
| If ‘YES’ to any of the above, please give details below or, if you prefer, attach details in a sealed envelope marked 'strictly confidential'. Failure to disclose, in accordance with the guidance, any information relating to criminal convictions may disqualify your application or result in dismissal without notice. | |

|  |  |
| --- | --- |
| **8. Health Declaration** | |
| Do you have any physical or mental impairment which may prevent you from carrying out the duties of the post?  In accordance with the Education (Teacher Qualifications and Health Standards) (England) Regulations 1999 an offer of appointment will be subject to medication clearance. | **YES / NO** (delete as applicable) |
| Appointments will only be made on successfully passing Occupational Health Screening (if applicable) | |

**Declaration by Applicant**

**The Working Time Regulations 1998**

***Regulations on Working Time***

The Work Time Regulations were introduced on 1 October 1998 and working hours in the UK are now governed by statute. Department working practices and procedures are therefore organised to comply with the following legal requirements. (Average hours are normally calculated over a 17 week period.)

* Average weekly working hours are limited to 48 hours
* Average daily night working hours are limited to 8 hours
* Minimum daily, weekly and in-work rest break requirements
* Minimum requirements for annual leave.

***Department Policy and Procedures***

The legislation was introduced as a health and safety measure. Employers who do not comply with the limits to working time will be committing a criminal offence. Working practices in the department are therefore monitored to ensure that generally, working hours remain well within legal limits.

Employers are required to take “all responsible steps” to ensure that the limits to working time are not exceeded. This included inquiring whether a person is working elsewhere. All applicants are therefore asked to declare all other employment.

***This declaration will not prejudice your application***

Please note:

* If you have other jobs(s), your application will still be assessed on your suitability to do the job you are applying for. At this stage, any other jobs you declare will be ignored.
* If you are selected for interview the implications will be carefully discussed with you. The department may consider it necessary to discuss the situation with your other employer(s) by only with your permission.
* Depending on the overall situation and the outcome of discussions with you, the department would have the following options:
  + not to offer you the appointment
  + offer the appointment on reduced hours
  + offer the appointment providing the other work is relinquished (or the hours reduced)
  + offer the appointment and enter into an agreement with you to opt out of the weekly working time limit.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **9. Other Employment** | | | | |
| **The Working Time Regulations 1998** | | | | |
| The working time Regulations were introduced in October 1998 and working hours in the UK are now governed by statute. If you have any additional employment which you intend to continue, if successfully appointed to the post applied for, please detail below. | | | | |
| **Section 1 – No other employment** | | | | |
| **I confirm that I do not have any other employment.** | | | | |
| Signature |  | | | |
| Print Name |  | | | |
| Date |  | | | |
| **If the form has been completed electronically**  Please place an ‘x’ in this box in place of your signature | | | | |
| **Section 2 – Other Employment** | | | | |
| **All other employment that I have is detailed below:**  Weekly hours must specify total regularly worked (including overtime) Please use the 24-hour clock | | | | |
| **Job Title** | | **Weekly Hours** | **Start Time** | **End Time** |
|  | |  |  |  |
|  | |  |  |  |
|  | |  |  |  |
|  | |  |  |  |
| Signature |  | | | |
| Print Name |  | | | |
| Date |  | | | |
| **If the form has been completed electronically**  Please place an ‘x’ in this box in place of your signature | | | | |

|  |  |
| --- | --- |
| **10. Driving Licence** | |
| Do you hold a current Driving Licence? | **YES / NO** (delete as applicable) |
| If ‘YES’, please state the type of licence you hold: |  |
| Do you have any current endorsements? | **YES / NO** (delete as applicable) |
| If ‘YES’, please specify: |  |

|  |
| --- |
| **13. Membership of professional associations**  Please indicate any membership below |
| **Name of professional association** |
|  |

|  |  |
| --- | --- |
| **14. Asylum and Immigration Act 1996** | |
| It is a criminal offence to employ persons whose immigration status prevents them from working in this country. The Act does not affect citizens of the UK, Ireland, European Economic Area and the Commonwealth, provided they have a right of abode in the UK. You will be required to provide evidence prior to appointment of a National Insurance Number, passport or other document on the approved list to satisfy Seaford Head School that the asylum Immigration Act 1996 is being complied with. | |
| Do you require a work permit? | **YES / NO** (delete as applicable) |

|  |  |
| --- | --- |
| **15. Declaration of Interests** | |
| Are you related by marriage, blood or as a co-habitee to any elected member of the School Governing Body or Academy Trust? | **YES / NO** (delete as applicable) |
| If yes, please state the name, relationship and position held. | |
|  | |
| Do you undertake any activities and/or responsibilities in connection with management committees of voluntary organisations? | **YES / NO** (delete as applicable) |
| If yes, please give details below | |
|  | |

|  |  |  |
| --- | --- | --- |
| **16. Declaration** | | |
| I hereby give my consent for the school and its appointed agents to process and retain on file information (including health and ethnic data) contained on this form and in accompanying documents. This is required for recruitment purposes, the payment of staff and the prevention and detection of fraud. All information will be processed in accordance with data protection legislation.  The information supplied by you will be subject to verification and the school may contact people and/or organisations to confirm some of the facts contained in your application, e.g. referees, previous employers, educational establishments, examination bodies, etc. The school may also obtain from or provide information to third parties and you authorise them to disclose your personal information to us.  Declaration  The information on this form is true and correct and will be used as part of my contract of employment. I accept that any false statement or omission may lead to the job offer being withdrawn or me being dismissed if appointed to the post. | | |
| Signed: |  | |
| Date |  | |
| Print name |  | |
| **If form has been completed electronically** please place an “X” in the box to the right to indicate your consent. | |  |

**CONFIDENTIAL: Equal Opportunities in Employment – Monitoring Form**

**This section will be removed for monitoring purposes before the selection process begins and will not affect the consideration of your application.**

Everyone is unique owing to differences in age, gender, ethnic origin, religion, sexual orientation, ability etc. Seaford Head School aims to treat these differences positively, recognising that diversity creates a strong, flexible and creative workforce.

Seaford Head Schools Equality of Opportunity in Employment Policy states that all applicants are to be treated fairly, and selection for appointment is to be based solely on a person’s ability to do the job.

Seaford Head School has a statutory duty to collect the information you provide on this form and it will assist us in ensuring fairness of treatment in appointment decisions, as statistical monitoring will show whether minority groups are being treated equitably.

This information will not affect the consideration of your application.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Job applied for | |  | | |
| Location | | SEAFORD HEAD SCHOOL | | |
| How did you learn about this vacancy? | | TES  Local Paper  Website  Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Surname and initials | |  | | |
| Age |  | | Date of Birth |  |
| Gender | M  / F | |  |  |

**Ethnic Origin**

This is the origin of your family rather than your nationality. For example, you could be British and your ethnic (family) origins could be any of the ones listed opposite, or a combination of them, or something more specific.

Please identify your ethnic origin either by putting an ‘x’ in ONE of the boxes below or by giving your own description in the space provided.

**a. White**

|  |  |
| --- | --- |
| British |  |
| Irish |  |
| Gypsy/Roma |  |
| Traveller of Irish Heritage |  |
| Any other White background |  |

**b. Mixed**

|  |  |
| --- | --- |
| White and Black Caribbean |  |
| White and Black African |  |
| White and Asian |  |
| Any other mixed background |  |

**c. Black or Black British If other, please specify:**

|  |  |
| --- | --- |
| Caribbean |  |
| African |  |
| Any other Black background |  |

**d. Asian or Asian British**

|  |  |
| --- | --- |
| Indian |  |
| Pakistani |  |
| Bangladeshi |  |
| Any other Asian background |  |

**e. Other ethnic groups**

|  |  |
| --- | --- |
| Chinese |  |
| Any other ethnic group |  |

**Disability Guidance**

Where an applicant has a disability and they meet the essential criteria of the post they are automatically shortlisted for interview. This positive action helps ensure people with disabilities get their fair share of jobs.

The Equality Act 2010 says that a person is disabled if they have a mental or physical impairment or long term health condition which has a substantial adverse effect on their ability to carry out normal day-to-day activities.

If you consider yourself to be disabled please let us know. We would appreciate advice on any assistance you may require or reasonable adjustments we might arrange to enable you to attend or participate in the interview, in compliance with the Equality Act 2010.

|  |  |
| --- | --- |
| Do you consider yourself to be disabled as set out in the Equality Act? (select as applicable) | Yes  / No |
| If YES, please describe your disability. | |
| If you need any assistance to attend or participate in the interview, please give details. | |

**Religion**

Please identify your religion by putting an ‘x’ in ONE of the boxes below.

|  |  |
| --- | --- |
| Christian |  |
| Buddhist |  |
| Hindu |  |
| Jewish |  |
| Muslim |  |
| Sikh |  |
| Other religion |  |
| No religion |  |
| Prefer not to say |  |

**Sexual Orientation**

Please identify your sexual orientation by putting an ‘x’ in ONE of the boxes below.

|  |  |
| --- | --- |
| Bisexual |  |
| Gay man |  |
| Gay woman / lesbian |  |
| Heterosexual / straight |  |
| Other |  |
| Prefer not to say |  |

**Military Status**

Please identify your military status by putting an ‘x’ in the relevant box below, if required.

|  |  |
| --- | --- |
| Territorial Army |  |
| Army Reservist |  |

**Employees with caring and parental responsibilities**

We value the contribution of carers, and we understand the additional pressures carers face in managing their work and caring responsibilities at the same time.

**Are you a carer?**

We consider a carer to be anyone who spends a significant proportion of their time providing unpaid support to family or friends. This could be caring for a partner, relative or friend who is ill, frail or disabled, or has mental health or substance misuse problems.

**Examples of caring activities**

A lot of people with caring responsibilities don’t identify themselves as being a carer. We consider you to be a carer if you provide:

* personal care such as help with bathing, washing, dressing, going to the toilet and administering medicines
* physical care such as help getting out of bed, walking, eating and feeding, getting out of the house and/or in the community and with shopping
* administrative support such as help with finances and filling in forms
* emotional support and company including listening, prompting, encouraging and raising confidence.

According to the definition of “carer” given above, do you have caring responsibilities for an adult?

|  |  |
| --- | --- |
| Yes |  |
| No |  |
| Prefer not to say |  |

**Are you a parent carer?**

The term parent carer means any person with parental responsibility for a child or young person with special educational needs or disability. It is an inclusive term and covers for instance foster carers, adoptive parents, and other family members.

According to the definition of a “parent carer” given above, do you have caring responsibilities for a disabled child under the age of 18 years?

|  |  |
| --- | --- |
| Yes |  |
| No |  |
| Prefer not to say |  |

**Are you a parent?**

We define a parent as:

* a mother, father, adopter, guardian, special guardian, foster parent or private foster carer of the child or a person who has been granted a residence order in respect of a child, or
* a person married to, or the civil partner of the child’s mother, father, adopter, guardian, special guardian, foster parent or private foster carer of the child or person who has been granted a residence order in respect of a child.

Are you a parent of a child or children under the age of 17 years?

|  |  |
| --- | --- |
| Yes |  |
| No |  |
| Prefer not to say |  |

**Data Protection Act 1998**

Seaford Head School will only process the information you have provided in this form for the purpose of recruitment and selection and, if you are successful in securing this position, for purposes relating to your employment.

Your details will be kept both electronically and in hard copy. We will not disclose this information about you to outside organisations or third parties unless there is a legal requirement to do so, or for the prevention and detection of fraud.