

**APPLICATION FORM**

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| Position applied for:  |
| **Personal Information** |
| 1. Personal details |
| Title : | Forename(s): | Surname: |
| Address: | Former name:(including maiden name) |
| Postcode: | Preferred name: |
| How long have you lived at this address: If less than 5 years please provide all previous addresses for past 5 years. |
| Previous address: | Previous address: |
| Postcode: | Postcode: |
| Length of time at address:  | Length of time at address:  |

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| Contact detailsHome telephone: Email: \_\_\_\_\_\_Mobile telephone: Work telephone:  |

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| 2. General |
|   Do you have Qualified Teacher Status? Yes **□** No **□** [Do you have a current full UK driving licence Yes **□** No **□**]Please provide full details of membership of any professional bodies \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

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| 3. Academic and Vocational QualificationsPlease provide details of all academic and vocational qualifications: |
| Award/Qualification | Awarding Body | Date Obtained | Grade (if appropriate) |
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| Professional Development |

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| Long Courses (Attended during the last 3 years) |
| Name of Course(and award if gained) | Provider | Ftime/Ptime or Seconded | From | To |
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| Short Courses (Attended during the last 3 years) |
| Name of Course | Provider | Ftime/Ptime or Seconded | From | To |
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| Outside Interests |
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| 4. Further Education and Career History |
| Please provide full details of all positions held and of all training/further education, employment, self-employment and unpaid work since leaving secondary education. Please start with your current or most recent employer and in each case the reason for leaving employment. Please provide explanations for any periods not in employment, further education or training. |
| Employer/Training Establishment(including dates) | Position held(including subject taught and at which level) | Reason for leaving |
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| Current Salary |

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| Salary (basic) if appropriate(Please indicate spine point) | Additions(Please indicate responsibility points, London Allowance etc) |
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| Total Salary |  |

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| Please set out in detail below a statement in support of your application, which addresses the criteria in the person specification for this post. |
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| 5. Please confirm if you know any existing employee, volunteer or Governor at the School and if so, please provide full details of how you know them. |
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| 6. RefereesPlease provide at least two professional referees. One referee should be your current or most recent employer. |
| Referee 1 | Referee 2 |
| Name |  | Name |  |
| Address |  | Address |  |
| Position |  | Position |  |
| Tel No. |  | Tel No.  |  |
| Email |  | Email |  |

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| **If there is insufficient space, please continue on a separate sheet if necessary giving page number and title heading.**  |
| 7. Data ProtectionThe information that you provide on this form will be used to process your application for employment. The personal information that you provide will be stored and used in a confidential manner to help with our recruitment process. More details as to how we will process your data is set out in the Recruitment Privacy Notice and Data Protection Policy.If you succeed in your application and take up employment with the School, the information will be used in the administration of your employment. We may check the information provided by you on this form with third parties. |

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| 8. DeclarationAs the job for which you are applying involves substantial opportunity for access to children, it is important that you provide us with accurate answers. You should be aware that the School will institute its own checks on successful applicants with the Disclosure and Barring Service (DBS), and, where appropriate, a check of the Barred List maintained by the DBS, and any offer of appointment will be made conditional on obtaining such satisfactory checksI have not been disqualified from working with children, I am not prohibited from working with children, and I am not subject to any sanctions imposed by a regulatory body *(e.g. the General Teaching Council for England, or the Teaching Regulation Agency).* I declare that the information I have given in this Application Form is accurate and true. I understand that providing misleading or false information will disqualify me from appointment or if appointed, may result in my dismissal. |
| Signature: Date:  |

Please return your completed application form to: Mrs Sally Witts, Bursar, s.witts@kingswoodhouse.org