### Application for a Teaching Post

# Churchdown School

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| Post Applied for: | Start Date: |

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| Personal Details | | | | | |
| Surname | | | Forenames | | |
| Title | Date of Birth | | Former Name | | |
| Address  Post Code | | | | | |
| E Mail | | | | | |
| Home Tel | | Day Tel | | | Mobile Tel |
| National Insurance Number | | | | DFES Number | |

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| Secondary Education | | | | |
| School Name | From | To | Examinations Taken | Grades |
|  |  |  |  |  |

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| Higher Education and Training | | | | | |
| University  or College | Dates | | Subjects  Studied | Qualification and  Degree Class | Award Date |
| From | To |

|  |  |  |  |
| --- | --- | --- | --- |
| Teacher Training Details | | | |
| Age range you are qualified to teach | |  | |
| Subjects you are qualified to teach | |  | |
| Have you passed your NQT Induction Year? | |  | |
| Have you passed the Numeracy Test? |  | Have you passed the Literacy Test? |  |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Current Post Employment Details | | | | | | | |
| School and LEA | Contract  Type | School  Type | Subjects and  Age Range Taught | | | Date Apptd | M  Point |
| Current Post |  |  |  | | |  | 1 2 3  4 5 6 |
| AdditionalPayments | Teaching and Learning Responsibility Points | | TLR Payment  £………….. | | SEN  1 or 2 | | |
| TheThreshold | Year Passed | | Upper Pay Spine Point 1 2 3 | | | | |
| Previous Posts or ITT Placements | | | | | | | |
| School and LEA | Contract  Type | School  Type | Subjects and Age Range Taught | Responsibility | | | Dates  **(From & To)** |
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| Key In Service Training in the last Two Years | | | | | |
| Course Title | Duration | Provider | Content | Year | Qualifications |
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| Other Employment | | |
| Employer | Nature of Employment | Dates (From and To) |
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| Personal Interests and Skills |
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| **Personal Statement in Support of your Application**  Please make full use of this section. You may copy and paste a letter of application into this section or attach further information as necessary. Shortlisting will be conducted only on the basis of this application and **no CVs will be accepted.** It therefore essential that all applicants, both external and internal, complete all sections of this application form |
| **Personal Statement (continued)** |

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| Rehabilitation of Offenders Act Because of the nature of work for which you are applying , this post is exempt from the provision Of the Rehabilitation of Offenders (Exceptions) (Amendments) Order 1986.Applicantsare, therefore, not entitled to withhold information about convictions which for other purposes are “spent” under the Provisions of the Act and, in the event of employment such convictions could result in a dismissal or disciplinary action by the school. Any information given will be completely confidential and will be considered only in relation to any application for positions to which the Order applies. Criminal Records Bureau Any applicant subsequently appointed to a post at Churchdown School will be subject to a check by the Criminal Records Bureau.  Have you been convicted of any criminal offence? YES NO  If you answer YES, please give details, place in a sealed envelope and attach to this form. |

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| Medical Information | | | | | |
| Are you a registered Disabled Person? | Yes | No | Registration Number | | |
| Have you suffered form any medical condition which has affected (or might affect in the future) your performance as a member of staff | Yes | No | If Yes please give details on a separate sheet | | |
| Please give details of any absence through ill health over the past 12 months | | | | | |
| Are you related to any member of staff or Governor currently employed or serving at Churchdown School? | | | | Yes | No |

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| **Referees**  Please give the name of two people to whom reference can be made. One referee should normally be your current Headteacher. Relatives may not be given as referees. |

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| Referees | | |
| **Name** | **1** | **2** |
| **Position** |  |  |
| **Address** |  |  |
| **Telephone** |  |  |
| **FAX** |  |  |
| **E Mail** |  |  |

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| **Declaration**  **I** declare that the information I have given on this form is correct and I understand that failure to complete the form fully and accurately could result in an incorrect assessment of salary and/or exclusion from shortlisting, or may, in the event of employment result in disciplinary action or dismissal.  **Signature: Date:** |

**Data Protection**

We collect your personal information to consider your suitability to work in the role for which you have applied for. We have a legal obligation to collect this information from you and to be able to meet our duties in the public interest of providing a safe and secure learning environment for our students.

If you are successful with your application we will keep this application form as part of your staff file. This will be held securely in accordance with our staff privacy policy. A copy of the staff privacy policy is available from the school office and a copy will be given to all successful candidates before commencing employment with us.

If your application is unsuccessful we will keep your details securely and for no longer than six months from the date of your application. Any electronic or paper copies of your personal information will then be securely destroyed. If you would like your details to be deleted before that date please contact our Human Resource Manager on [ACE@churchdownschool.com](mailto:ACE@churchdownschool.com)