Application for Appointment to a Teaching Post

*Please complete in* ***Black Ink*** *and in BLOCK CAPITALS*

1 Post Information

|  |  |
| --- | --- |
| Position applied for: |  |
| Name of School: |  |

2 Personal Details

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Title: |  | | First name(s): | | | | |  | | Last name: | | | |  |
| Previous surname (if applicable): | | | | | |  | | | | | | | | |
| Address: | |  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| Post Code: | |  | | | Tel no.: | |  | | | | Mobile no.: | |  | |
| Email: | |  | | | | | | | | | | | | |
| National Insurance number: | | | |  | | | | | DfE number: | | |  | | |

3 Current Post Details

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Present post: |  | | Present Salary & Pay Spine: | | |  | | |
| Present school: |  | | | | | | | |
| Present Local Authority: |  | | | | | | | |
| Date from: |  | Date to: | |  | Full or part time: | | |  |
| No. on roll: |  | | Boys/girls/mixed: | | | |  | |
| Subjects or Key Stage: |  | | | | | | | |

4 Academic and Professional Qualifications

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Dates attended | | Name of school or college | Qualification obtained and grade or level | Subject(s) |
| From  mm/yyyy | To  mm/yyyy |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

5 Teaching Employment History  
 In chronological order starting with the earliest

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Dates employed | | Name and address of school or employer | Boys/girls /mixed and no. on roll | Ages & subject(s) | Reason for leaving |
| From  mm/yyyy | To  mm/yyyy |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

7 Other Employment and Voluntary Work

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Dates | | Name and address of employer or organisation | Job title | Reason for leaving |
| From  mm/yyyy | To  mm/yyyy |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **If there are any gaps in your employment since leaving education or education history, please explain them here.**  *Failure to do so may result in your application not being considered, particularly if you are applying for a role which is exempt from the Rehabilitation of Offenders Act 1974.* | | | | |

8 Training Courses  
 Courses attended in the last 3 years other than initial training, inc short courses & seminars.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Dates attended | | Name of course provider | Name of course | Details |
| From  mm/yyyy | To  mm/yyyy |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

9 Letter of Application

|  |
| --- |
| Using the person specification that you have been sent with your application pack, please use examples to demonstrate your suitability for the position you are applying. Please include your reasons for applying for and interest in this position by using no more than two sides of A4 at font size 12. |

10 References

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Please supply the names and contact details of at least two referees who can comment on your suitability for this position. One should be your current or most recent employer.  ***N.B. if you are not currently working with children but have done so in the past, the second referee should be the employer by whom you were most recently employed in work with children. References will not be accepted from relatives or persons who only know you as a friend.*** | | | | | | | |
| **First referee - current employer** | | | **Second referee** | | | | |
| Name |  | | Name | |  | | |
| Position |  | | Position | |  | | |
| Address |  | | Address | |  | | |
|  | |  | | |
|  | |  | | |
| Telephone no. |  | | Telephone no. | |  | | |
| Email |  | | Email | |  | | |
| Name of employer |  | | Name of employer | |  | | |
| In what capacity does the referee know you | |  | In what capacity does the referee know you | | |  | |
| **Please note that, if you are shortlisted, we will contact your referees and request references prior to interview. We will seek information about the nature of any live warnings due to disciplinary or capability proceedings and any past disciplinary issues relating to children and/or child protection concerns you may have been subject to. We will also ask your referees if they are aware of any reason why you would be unsuitable to work with children or vulnerable adults.** | | | | | | | |
| Please indicate if your referees can be contacted at this stage: | | | | * Yes | | | * No |

11 Advertisement

|  |  |
| --- | --- |
| Where did you see this post advertised? |  |

12 Canvassing

|  |  |  |  |
| --- | --- | --- | --- |
| **Canvassing members of the committee or the Governors of the respective schools, both directly or indirectly, is forbidden and will disqualify applicants.** | | | |
| A candidate for any appointment within the school shall, when making application, disclose whether he or she is related to any of the following:   * An employee of the school * An employee of Oak Trees Multi Academy Trust * A Senior Officer employed by the Council * A governor of the school * An Oak Trees Trustee or Member   **A candidate who fails to disclose any such relationship shall be disqualified from the appointment and if appointed, shall be liable to dismissal without notice.** | | | |
| Are you related to any of the people listed? | | * Yes | * No |
| If yes, please specify the person and your relationship: |  | | |

13 Declaration

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| I declare that the information I have given on this form is complete and accurate and that I am not banned or disqualified from working with children nor subject to any sanctions or conditions on my employment imposed by a regulatory body or the Secretary of State. I understand that to knowingly give false information or to omit information could result in the withdrawal of any offer of appointment or my dismissal at any time in the future and possible criminal prosecution. I also agree to obtain an Enhanced Level DBS Disclosure when necessary. | | | | | |
| Signed: |  | Name: |  | Date: |  |
| ***All candidates applying for employment via email accept this electronic copy as their signature and if successful will be required to sign and date the form.*** | | | | | |

14 Interview

|  |
| --- |
| If you do not hear from us within six weeks of the closing date, please assume that your application has not been successful. You will find the closing date in the advertisement. |