



CONFIDENTIAL Application Form for Teaching Post

Please complete ALL sections. Sections 1 -6 of the application form will be used to shortlist candidates for interview.					
POST APPLIED FOR:	CLOSING DATE:				
1. PERSONAL DETAILS (ple	ease complete in block letters)				
Title by which you wish to be referred: (Mr/Mrs/Miss/Ms/Other)	Last Name:				
First name(s)					
Address for Correspondence:	Postcode:				
Home telephone no:	Mobile telephone no:				
Work telephone no: Extension (if applicable):	Teacher Reference Number				
Email address:					
2. PRESENT OR LAST EMPL	OYER				
Name and address of employer:	Name and address of establishment where employed (if different):				
Postcode:	Postcode:				
Job Title:	Point on Scale:				
Current annual salary (gross):	Additional Allowance:				
Hours worked per week:	Other benefits (if applicable):				
Date appointed:	Notice required or leaving date if already left				

Reason for le	Reason for leaving:							
Brief descript duties:	Brief description of duties:							
3. PREVIOUS EMPLOYMENT								
Start with the most recent first. Include work/voluntary experience and any periods of unemployment. Do not leave any unexplained gaps. (Please continue on separate sheet if necessary).								
Employer name & address	Job title	Salary	//income	Full or part-time (if part- time, give hours)	Dates (month/year)		Reason for leaving	
					From	То		
4. EDU	CATION, T	RAINING 8	QUALIFIC	ATIONS				
(Please contii	nue on sen	arate sheet :	if necessary)) Please st	art with	the mo	st rece	ent
	10.0 0.1 0 0 0							
Secondary School/College/Univers ity		Da	Dates				Date of award	
		From	То					

TEACHER TRAINING							
Main teaching subject:			Subsidiary subjects:				
	Primary Secondary Further Age range trained for:						
OTHER RELEVANT TRA separate sheet if nec		OURSES AT	TENDED (I	Please	continue or	1	
Organising Body	Cours	e title		Length	of course		
MEMBERSHIP OF PRO	FESSION	AL BODIES					
Name of body	Туре	Type of membership		Date obtained			
5. INFORMATION IN SUPPORT OF YOUR APPLICATION							
Please provide additional information / or a letter outlining why you are interested in this particular post and any relevant experience, skills or knowledge to support your application. Be concise but make sure that you cover ALL the essential points of the job description / person specification.							
Please Note: Your response to this section is extremely important and will be the basis of the short-listing panel's decision to invite you for interview. (Please complete on a separate sheet if necessary)							

6. REFEREES			
referees. One of the no offer of employm previously been emp	ls of two referees below. Frigerees must be your present will be made without refoloyed, then Head Teachers, the authoritatively on your eduable as referees.	ent/or most recent ference to him/her. , College Lecturers,	employer and normally If you have not , or other persons who
The Academy reserv	res the right to approach an	y previous employe	er or manager.
Please note:			
	ted and invited to intervi ed prior to interview in li		
Name (Referee 1):		Name (Referee 2):	
Title	Mr/Mrs/Miss/Ms/other	Title	Mr/Mrs/Miss/Ms/other
Role:		Role:	
Organisation (if appropriate):		Organisation (if appropriate):	
Address:		Address:	
Postcode:		Postcode:	
Telephone No:		Telephone No:	
Email address:		Email address:	
How long known?		How long known?	
Do you give consent	to us contacting your	YES NO	

	1			
present employer prior to interview?				
If no, you may wish to give reasons:	If no, you r	nay wish to give reasons:		
7. PROTECTION OF CHILDREN				
The amendments to the Rehabilitation of Offer (2013 and 2020) provides that when applying convictions and cautions are considered 'prote to be disclosed to employers, and if they are d into account.	for certain jo ected'. This r	obs and activities, certain means that they do not need		
Guidance about whether a conviction or caution should be disclosed can be found on the Ministry of Justice website. Independent and confidential advice may be sought from: UNLOCK www.unlock.org.uk NACRO www.nacro.org.uk 0300 123 1999				
Please answer the following questions.				
Do you have any unspent conditional cautions convictions under the Rehabilitation of Offende 1974?		YES NO		
Do you have any adult cautions (simple or con or spent convictions that are not protected as the Rehabilitation of Offenders Act 1974 (Exce Order 1975 (Amendment) (England and Wales 2020?	defined by ptions)	YES NO		
Are you at present the subject of a criminal ch investigation?	arge or	YES NO		
Is there any other relevant information that yo disclose?	u wish to	YES NO		
If YES to any of the above questions, please gi	ve brief deta	ails including dates.		
We are committed to safeguarding and promo and vulnerable adults and we expect all staff a Successful applicants will receive the Safeguar responsibilities of the employer and all employ	and voluntee rding Policy	rs to share this commitment.		

8. REASONABLE ADJUSTMENTS FOR A DISABILITY				
If you are disabled, please give details below of how we can ensure that you are offered a fair selection and interview process or if you would prefer, please contact the Academy to discuss any requirement.				
9. HEALTH/MEDICAL DETAILS				
Successful applicants will be required to complete a con and may be required to undergo a medical examination				
10. DATA PROTECTION				
In completing this application form you should refer to the Recruitment Privacy Notice sent out with this document. The personal information collected on this form will be processed to manage your application in accordance with the Recruitment Privacy Notice. If successful, your personal information will be retained whilst you are an employee and used for payroll, pension and employee administration in accordance with the Workforce Privacy Notice which is available on the Trust website and will be issued on appointment. Information will not ordinarily be disclosed to anyone outside the Trust without seeking your permission first, unless there is a statutory reason for doing so.				
If you are not shortlisted or appointed, then your information of months from the shortlisting date	tion will only be retained by us for			
11. GENERAL				
Are you interested in job sharing?	YES NO			
Please give details of any dates within the next 2 months when you will not be available for interview. We cannot guarantee being able to offer you an alternative date.				
Do you hold a current full driving licence?	YES NO			
Do you have regular use of a vehicle?	YES NO			
You are required to declare below any relationship with	or to an employee of the Trust.			
Please state name and position:				
Have you ever been the subject of formal disciplinary proceedings? If yes, please give details including dates below.	YES NO			

This information is required, including that related to warnings regarded as "spent" in order to ensure safe recruitment and meet our obligations to safeguard children. However, you should be aware that any disciplinary history declared will not automatically prevent or inhibit appointment and will depend on the dates and circumstances related to the disciplinary action, outcomes and the type of post being applied for. Note that you are also required to include information if you were subject to a disciplinary process but resigned before it was completed.

12. DECLARATION

If you return your application form to us by email and you are subsequently invited to interview, you will be required to sign a printed copy of your form.

I declare that, to the best of my knowledge and belief, the information given on ALL parts of this form is correct. I understand that, should my application be successful and it is discovered subsequently that information has been falsified, then disciplinary action may be taken which may include dismissal from the post.

I confirm that I have a legal right to work in the UK and if this application is successful, I undertake to produce appropriate documentary evidence to prove this, prior to commencing work with the Academy.

Signed Date

Please return your completed form by email to recruitment@tscacademy.org.uk or via Tes:

If you have not received a reply within the next 3 weeks, you should assume that your application has been unsuccessful.

Left Intentionally Blank

Equality and Diversity Monitoring

This section will be separated from the main sections of the application form. Collection of equality information is solely for monitoring purposes to ensure that our policies and procedures are effective. We also collect this data in accordance with the general and specific public sector equality duties under the Equality Act 2010. Any data you enter onto this monitoring form will only be used for monitoring purposes and will not be used in assessing and or scoring your application or during the interview process. This information is kept fully confidential and access is strictly limited in accordance with the General Data Protection Regulations.

Ethnicity	Workforce census code		Pleas e tick		Pleas e
White	WBRI	British English Welsh Northern Irish Scottish		D: 1	tick
	WIDI			Bi-sexual	
	WIRI	Irish		Gay Man	
	WIRT	Traveller of Irish Heritage		Gay Woman	
	WRO M	Gypsy / Roma		Heterosexual Other	
	WOT H	Any other White background		Prefer not to say	
Mixed	MWB C	White and Black Caribbean			
	MWB A	White and Black African			
	MWA S	White and Asian		Gender	Please tick
	MOTH	Any other Mixed background		Female	
Asian or	AIND	Indian		Male	
Asian				Transgender	
British				Prefer not to	
	APKN	Pakistani		say	
	ABAN	Bangladeshi		_	
	CHNE	Chinese		_	
	AOTH	Any other Asian background		Personal	Please
Black or Black	BCRB	Black - Caribbean		relationship	tick
British				Single	
	BAFR	Black – African		Living together	
	BOTH	Any other Black background		Married	
Other	ARAB	Arab		Civil	
ethnic	CHNE	Chinese		Partnership	
group	REFU	Refused/Prefer Not to Say		Prefer not to	
	OOTH	Any other ethnic group		say	

Religion or belief	Please tick
No religion	

Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	
Buddhist	
Hindu	
Jewish	
Muslim	
Sikh	
Any other religion (Write in)	
Prefer not to say	
Disability	Please tick
Do you consider that you have a disability?	
Yes - Please complete the grid below	
No .	
Prefer not to say	
My disability is:	
Physical Impairment	
Sensory Impairment	
Mental Health Condition	
Learning Disability/ Difficulty	
Long standing illness	
Other	
Prefer not to say	
Information from this application may be processed for the purposes registe Employer under the General Data Protection Regulation ((EU) 2016/679)) (Grefer to the Diocese of Southwell of Nottingham Multi Academy Trust Privacy further information on how we will process your data.	DPR). Please
I hereby give my consent to The Samworth Church Academy processing the supplied in this application form for the purpose of recruitment and selection electronically, without signature, you automatically agree to the declaration	n. If sent
Signed Date	