

Application for Employment: Teaching Posts

Post applied for:	Reference number:
School / Service:	

1. Personal Details

Title: Mr/ Mrs / Miss/ Ms, etc:

Last name:

First name(s):

Previous last name:

Home address:

Postcode:

Home telephone number:

Mobile phone number:

Email address:

Date of birth (dd/mm/yyyy):

Are you currently registered with the GTC? Yes / No

If 'No' please state reason:

DCSF number:

Date when available to start:

National Insurance number:

2. Current or Most Recent Teaching Post

Name and type of School:

Number on roll:

Employing Authority / Agency:

Position held:

Salary scale:

Other allowances:

Date commenced:

Leaving date (if applicable):

Reason for leaving:

3. Employment History – Previous Teaching Posts Held

Please give details of all your previous teaching posts, full-time and part-time. Please start with your most recent post and work backwards. Any gaps in your history of teaching employment should be accounted for in Sections 4a, 4b or 6. If you require more space, please continue on a separate sheet and attach to your application form.

School (name, type and number on roll) and employing Local Authority / agency	Start date – leaving date and reason for leaving	Post(s) held
Subjects /Key Stages taught / Key responsibilities:		

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Subjects /Key Stages taught / Key responsibilities:		

4. Education, Training and Development

4a. Secondary and Further Education

Please enter details of your Secondary Education and Further Education including details of qualifications obtained.

School / College (name & address)	Dates Attended (from – to)	Qualifications (subject, level and grade)	Year of Award

4b. Higher Education and Professional Qualifications

Proof of the following qualifications will be required prior to confirmation of appointment.

Please enter details of all Higher Education awards and professional qualifications including any award leading to Qualified Teacher Status (UK QTS). Please continue on a separate sheet if necessary.

University / College / Awarding Institution	Dates Attended (from – to)	Qualification Details (including subject and level / grade of award.)	Date of Award

Please give the following details regarding your teaching experience and training:

Please indicate all the Key Stages you are specifically qualified to teach (tick boxes):

Early Years /Foundation: Key Stage 3:
Key Stage 1: Key Stage 4:
Key Stage 2: Key Stage 5 / Post 16:

Please state all the Subjects/ Subject Areas you are qualified to teach:

5. Courses Attended

Please provide details of additional courses relevant to your application that you have attended in the last 3 years.

Course Title	Organising / Accrediting Body	Date

6. Employment / Activity other than Teaching Posts and Further/Higher Education

Please provide details of any employment or other activity not covered in sections 2, 3 or 4 - for example, any non-teaching paid employment, any voluntary work or periods of time out of employment. Please start with your most recent experience and work backwards. If you require more space please continue on a separate sheet and attach to your application.

Job Title (or nature of activity if not employment)	Name & Address of Employer (if applicable)	Dates (from – to)

7. Statement of Application

Please complete a Statement of Application and attach to this Application Form. You are advised that short-listing for interview will be undertaken with reference to the criteria given in the Person/Employee Specification only. It would be helpful if you could structure your statement to address all the criteria in the order given. Please label your statement clearly with your name and the post title you are applying for and attach to this form.

8. Reference Details

Please supply the names and contact details of at least two referees who can comment on your suitability for this position. One should relate to your current or most recent teaching employment (or teaching practice placement). For senior leadership posts, as well as the Chair of Governors or Headteacher, please include a referee from the relevant Local Authority where applicable.

Referee 1.

Name:
Position:
In what capacity do you know this person?
Name of organisation:
Address:
Telephone number:
Email:

Referee 2.

Name:
Position:
In what capacity do you know this person?
Name of organisation:
Address:
Telephone number:
Email:

9. Personal Declarations

It is essential that you complete sections 9a to 9e in order for your application to be accepted.

9a. Disclosure of Convictions

The position for which you are applying involves substantial contact with children and is therefore exempt from the Rehabilitation of Offenders Act 1974 and all subsequent amendments (England and Wales.) This means that for this position, you are not entitled to withhold any information about police cautions, 'bind-overs' or any criminal convictions, including any that would otherwise be considered "spent" under the Act and you should declare any such information as follows:

Have you ever been convicted of any offence or 'bound-over' or given a caution? (please tick accordingly)

Yes

No

If 'yes' please give details on a separate sheet and attach in a sealed envelope marked 'Private and Confidential Disclosure.' If you are submitting this form electronically, please contact the School or office from where the application form was sent, for instruction on how the information should be submitted.

CRB Disclosure

All posts based in establishments which deal exclusively or mainly with children and young people or posts involving work with children or young people, are defined by the Criminal Justice and Court Services Act 2000 as 'Regulated Positions' and the name of the successful candidate will be submitted to the Criminal Records Bureau for Enhanced Disclosure of criminal conviction(s). This will include details of cautions, reprimands, final warnings, police enquiries and pending prosecutions as well as convictions. If the School / LA find anything in that record which is considered prejudicial to the applicant working with children or young people, then the appointment may not be confirmed.

9b. Disqualification

Are you banned or disqualified from working with children or subject to any sanctions or conditions on your employment, imposed by the Independent Safeguarding Authority (ISA), Secretary of State or other regulatory body (e.g. the GTCE)?

Yes

No

If 'yes' please give details on a separate sheet and attach in a sealed envelope marked 'Private and Confidential Disclosure.' If you are submitting this form electronically, please contact the School / Office from where the application form was sent, for instruction on how the information should be submitted.

9c. Relationships

Are you related to, or partner of, any Councillor, Council / School Employee or Governor within the London Borough of Hounslow?

Yes

No

If 'Yes' please provide details here:

Please note: Canvassing of Councillors, Employees or Governors directly or indirectly will disqualify candidates from appointment.

9d. Eligibility to work

Are you a UK or EU / EEA Citizen? Yes No

If 'No', please indicate if you will require a Certificate of Sponsorship to work: Yes No

If 'No' please indicate the basis on which are you eligible to work within the UK:

9e. Declaration statement

This Authority is under a duty to protect the public funds it administers and to this end may use information you have provided in your application form within the Authority, for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for these purposes.

Please sign and date this form if you agree with the following statement:

For the purposes of the Data Protection Act 1998, I consent to the information contained in this form and any information received by or on behalf of the London Borough of Hounslow relating to the subject matter of this form, being processed by them in administering the recruitment process.

I declare that the information I have given on this form and attachments is correct and true and agree that this forms part of the basis of my engagement and may be used for registered purposes under the Data Protection Act 1998. I authorise the London Borough of Hounslow (or school to which I am applying) to check the information supplied and understand that providing misleading or false information or omitting any relevant information, could result in the withdrawal of any offer of appointment or my dismissal at any time in the future and possible criminal conviction.

Signature

Date.....

For online / electronically completed applications, by ticking the following box and submitting your application, you agree to the terms of the declaration above:

All candidates applying for employment via email/online will be required to sign and date this form, if invited to attend interview.

Please now complete the following Equal Opportunity Monitoring Information.

10. Equal Opportunity Monitoring Information

We are committed to equality of opportunity and are keen to monitor the effectiveness of our recruitment practice. Any information provided on this form will be treated in the strictest confidence and will only be used for the purpose of recruitment monitoring.

Please tick or complete as appropriate.

Name:

Post Applied for:

School / Service:

Gender

Male:

Female:

Age Group

Under 20 years:

20 – 29 years:

30 – 39 years:

40 – 49 years:

50 – 59 years:

60 + years

Ethnic Origin

How would you describe your ethnic origin? (please tick one.)

White

White British:

White Irish:

White European:

Any Other White background:

Asian or Asian British

Indian:

Pakistani:

Bangladeshi:

Any other Asian background:

Black or Black British

Black Caribbean:

Black African:

Any other Black background:

Dual Heritage

White and Asian :

White and Black African :

White and Black Caribbean:

Any other dual background:

Other Ethnic Groups

Chinese :

Any other ethnic group:

People with Disabilities

The Disability Discrimination Act 1995 defines a person as disabled if they have a “physical or mental impairment which has substantial or long-term adverse effect on a person’s ability to carry out normal day-to-day activities.”

Do you consider yourself to have a disability?

Yes:

No:

Advertisement: Where did you see this post advertised?

**Thank you for taking the time to fill in this Equal Opportunities monitoring form.
A copy of this application form is also available at www.teachinhounslow.org.uk**