

Application Form

Applicant Surname (CAPITAL LETTERS):

Please return your completed application form to:

jobs@eps.barking-dagenham.sch.uk or

Eastbury Primary School, Dawson Avenue, Barking, IG119QQ

Thank you for your interest in this post.

The following information is necessary to ensure that full consideration can be given to all candidates. The information given will be treated as confidential.

Please complete the application form in black ink or type and ensure you complete all the sections. The Declaration must be signed and can be found on the reverse of this form. When submitting this form electronically you will be required to confirm the information is accurate by ticking the box in section 15.

If you have any special requirements and/or require reasonable adjustments to enable you to complete this form and/or during the recruitment process please contact the school office.

	Section 1
Post Details	
Application for appointment as:	
School:	
Reference no. (if applicable)	
Closing date:	
How did you find out about the role:	

Personal Details	Section 2
Last name and title:	
Previous names:	
Home telephone no:	Home email address:
Nork telephone no:	Work email address:
Address:	
	National Insurance no:
Do you have the right to work in the	e UK? Yes No
Present Employment (if	currently employed)
Employer's name and address (if a	
Nature of business:	
Current post title:	Date appointed:
Grade/salary range:	Current salary: £
Notice required:	Allowance(s) received: Type(s)
Reason for leaving:	Value(s): £
Please tick the box if you do not	wish to be contacted at work

		in your cu	rrent or most re		
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				Sect	tion 5
revious E	mployment	t and part time	e positions. Please		
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Breaks in Employment History

If you have had any breaks in employment since leaving school, give details of these periods and your activities during these times e.g. unemployment, career break, voluntary work, training.

Section 6

Start date	End date	Reason for break

Ability to travel (if required)		Section 7
Do you have a valid driving licence?	Yes	No
Do you have access to a vehicle which you are able to use for work purposes?	Yes	No
If not, are you able to travel, for work purposes, by another means of transport?	Yes	No

Secondary Sch	ool Edu	cation	l (please list most recent fir	rst)	Section 8
School(s)	From	То	Qualification/subject obtained and awarding body	Grade	Dates

Continuing Educa Please list most recent	•	Jniversi	ty/College/Apprenticeships	etc.) S	ection 9
Education Establishments	From	То	Qualification/subject obtained and awarding body	Grade	Dates

	Section 10
Professional Qualifications Including details of professional association membership	
Do you hold Qualified Teacher Status (QTS)?	No
Teacher Reference Number:	
If yes please complete the following:	
Date NQT Statutory Induction Period (if qualified since August 1999) (statutory rec maintained schools)	quirement for
Started: Completed:)

Other relevant training an in the last five years Please list the most recent first and c		
Brief description/Course title	Date	Organising body

Section 12

Information in support of this application

Please use the person specification as a prompt to describe the experience, skills, competencies and qualifications that make you suitable for this job. These may have been gained from your work experience, any voluntary or community work or any other organisation you may have been involved with. You should ensure that any information submitted reflects your experience relating to the competencies that are detailed in the Person Specification (please continue on a separate sheet if necessary). *If you are a teacher, please provide details of any specialist teaching experience/skills you possess that may be relevant to the post.*

Section 13

References

allowed.

Please give the name and addresses of your two most recent employers (if applicable). If you are unable to do this, please clearly outline who your referees are. Applicants must ensure referees consent to be contacted and for reference information to be held for a period of 6 months.

1) Name	2)	Name		
Address:		Address:		
Position:		Position:		
Telephone number:		Telephone number:		
Relationship between referee and a	applicant:	Relationship between referee and applicant:		
Period of time applicant known to re	eferee:	Period of time applicant known to referee:		
Email address:		Email address:		
Note: (i) Referees will be contact	ed before inte	rviews.		
(ii) If either of your referees	know you by a	another name please give details.		
(iii) The school may contact	other previous	s employers for a reference without your consent.		
	·	relatives or from people writing solely in the		
Close Personal Relationsh	nips	Section 14		
	hich your appli	personal relationship with, any employee, Trustee cation is being made? If 'yes', please state the below).		
		Yes No		
Failure to disclosure a close personal Canvassing of Governors, Trustees or		above may disqualify you. Pers of the School/Trust by or on your behalf is not		

Please read the following statements and information relating to your application carefully. By submitting this form and clicking on the box below you are certifying that the information you have supplied is accurate and confirming that the declarations are true to the best of your knowledge. Any false information will result in the withdrawal of any offer of employment or, in the event of employment, in disciplinary investigation by the school which may result in dismissal.

Declaration

I certify that the information I have supplied on this form is accurate and true to the best of my knowledge.

Disclosure of Criminal Convictions

Short-listed candidates will be asked to complete a Self-Disclosure Form (SD2) and, where appropriate for the role, a disclosure/status check will be sought from the Disclosure and Barring Service (DBS) in the event of a successful application.

A conviction/caution/reprimand will not necessarily be a bar to obtaining employment, save in the case of management positions where a S128 Direction issued by the Secretary of State will prohibit employment.

Safer Recruitment and Childcare Disqualification Checks

I certify that I am not disqualified from working with children or subject to any sanctions imposed by a regulatory body which would prohibit or restrict me from applying for this post.

Short listed candidates applying for a relevant post in a school setting covered by the Childcare (Disqualification) Regulations 2009 ("the Regulations") will be asked to complete a Disqualification Declaration Form. A disqualified person may only be employed in a relevant post if they obtain a waiver from Ofsted. A copy of the Disqualification Declaration Form is available from the school office if you wish to review this Form prior to submitting your application.

Data Protection

I acknowledge that by completing this form the school will hold and process personal data (including special categories of data e.g. information about health) about me in line with their data protection policy. I acknowledge that the school will use/process this information for the duration of the recruitment process. I acknowledge this information will only be shared in line with the Privacy Notice.

Data Protection (continued)

If I am the successful applicant I acknowledge that this information will be retained in line with the school's/Trust retention schedule. If I am not the successful candidate I acknowledge this information will be retained by the school/Trust in a secure electronic/paper system for no longer than 6 months from the date of the appointment of the successful candidate.

All forms submitted (in paper or electronic format) will be held securely by the school/Trust in line with their data protection policy.

Thank you for applying for this post and your interest in working for this school/Trust. It is not our normal practice to acknowledge receipt of paper applications. If you submit this form electronically you will receive confirmation that the form has been received.

Name: _____ Date: _____

Signed: _____