Staffordshin County Coun	Cil If you need a	rs Applic a copy of this infor r language or on o	rmation in large	print,	R6
Application for the Post of:			Job No:		
School Name:			Candidate Ref No.		
If you are a current employ	ee are you applying for	this post as a rede		Yes 🗌	No 🗌
1. Personal Information		·			
Last Name			Previous Name(s): (if applicable	e)
First Name(s):					
Home Address:					
Please specify alternative correspondence address on a separate sheet.		Postcode:			
E-mail address:					
National Insurance Numbe	r (If you have one):				
Date of Birth:					
Do you have a full current driving licence?	Yes 🗌 No		elephone Number:		
Do you have daily use of a vehicle?	Yes 🗌 No		elephone Number:		
Do you have any penalty po on your licence?	^{oints} Yes 🗌 No	Mobile Te	elephone Number:		
If so, how many?					
Do you consider yourself to	have a disability?			Yes 🗌	No 🗌
(NB: The Equality Act define which has a substantial a activities")					
The County Council opera essential criteria of the pos		ntee scheme for p	people with a dis	ability and who	o meet the
If you have a disability, are you are called for interview		nts which we can r	make for you if	Yes 🗌	No 🗌
If Yes, please outline your	requirements:				
How did you find out about	this job?				
Are you applying on a job s	share basis?	Yes 🗌 No			
If so, please state the prop	ortion of full-time you ar	e willing to work:			04 30 05 2013

2. Qualified Teacher I	nformation		
a) Date of gaining Q	ualified Teacher Status:		
b) Teacher Registrat	tion number:		
c) If you qualified aft have you completed	er 7 th May 1999, your induction year?	Yes 🗌 No 🗌 If yes, g	give date
d) Have you passed (Trainees only)	your skills tests?	Numeracy 🗌 Liter	racy 🗌 ICT 🔲
If not, when do you e	expect to complete them?		
Successful applicants w	ill be required to provide evi	dence of their registration with t	ne Teaching Agency
3. Present (or Most R	ecent) Employment		
Job Title:			
Company/School Name, Address & Telephone Number:			
Start Date:		End Date: (If applicable)	
Salary:		Allowances: (Please specify)	
Brief Details of Post:			
If this post is a Teaching	Role please complete the f	following section:	
Subject/ Specialisms:		Employer: (e.g. Local Authority)	
Approximate number on roll:		Age range taught:	

4. Previous Employment

unemployment, vo		full-time education should be accounted for e.g. part-time work undertaken whilst in education.	
Job Title:			
Company/School Name, Address & Telephone Number:			
Start Date:	End Date	: (If applicable)	
Salary:	Allowance	es: (Please specify)	
Brief Details of Post			
If this post is a Teac	hing Role please complete the following s	section:	
Subject/ Specialisms:		ployer: (e.g. Local hority)	
Approximate number on roll:	Age range taught:		
Job Title:			
Company/School Name, Address & Telephone Number:			
Start Date:	End Date	: (If applicable)	
Salary:	Allowance	es: (Please specify)	
Brief Details of Post			
If this post is a Teac	hing Role please complete the following s	section:	
Subject/ Specialisms:		ployer: (e.g. Local hority)	
Approximate number on roll:	Age	e range taught:	

Job Title:				
Company/School Name, Address & Telephone Number:				
Start Date:		End Date: (If applicable)		
Salary:		Allowances: (Please specify)		
Brief Details of Post	:			
If this post is a Teac	ching Role please complete the	e following section:		
Subject/ Specialisms:		Employer: (e.g. Local Authority)		
Approximate number on roll:		Age range taught:		
	L			
				
Job Title:				
Company/School Name, Address & Telephone Number:				
Start Date:		End Date: (If applicable)		
Salary:		Allowances: (Please specify)		
Brief Details of Post				
If this post is a Teac	ching Role please complete the	a following section:		
Subject/		Employer: (e.g. Local		
Specialisms: Approximate		Authority)		
number on roll:		Age range taught:		

Job Title:					
Company/School Name, Address & Telephone Number:					
Start Date:		End	Date: (If applicable)		
Salary:		Allow	vances: (Please specify)		
Brief Details of Post:					
If this post is a Teacl	hing Role please complete the	e follov	ving section:		
Subject/ Specialisms:			Employer: (e.g. Local Authority)		
Approximate number on roll:		Age range taught:			
number on roll.					
Job Title:					
Company/School Name, Address & Telephone Number:					
Start Date:		End	Date: (If applicable)		
Salary:		Allow	vances: (Please specify)		
Brief Details of Post:					
	hing Role please complete the	e follow			
Subject/ Specialisms:		Employer: (e.g. Local Authority)			
Approximate number on roll:			Age range taught:		

5.	Other	Relevant	Experience
----	-------	----------	------------

6. Education

Please give details	of all	nationally	recognised	qualifications	awarded/results	awaited;	from	GCE	Advanced
Level to Further De	egree	Level or th	eir equivaler	nts in chronolo	gical order.				

Atter	nded	Name of			F/T		Dete
From (mm/yy)	To (mm/yy)	Name of School/College:	Qualification:	Subject:	or P/T	Grade/ Level:	Date Gained:
	, ,						

Copies of essential qualifications will be required on appointment.

7. Training (Other Continuing Professional Development)

Please list any relevant courses or training you have attended in the last five years starting with the most recent (Please continue on a separate sheet if necessary). If applying for a headship, please include details regarding NPQH.

Title of Course:	Organising Body:	Awards (if any):	Date of Attendance: (mm/yy)

8. Letter of Application

Please attach a separate letter of application – of no more than 2 sides of A4 to support your application. Details of the specific topic to be addressed will be found in the recruitment literature.

9. Self declaration of criminal record

This post involves working in a school and is exempt from the provisions of the Rehabilitation of Offenders Act 1974. We will check with the Disclosure and Barring Service (DBS) to see if you have any criminal convictions. As posts in schools are 'Regulated Activity' the barred list for children will also be checked.

You must disclose details of all unspent and unfiltered spent reprimands, formal warnings, cautions and convictions.

For information regarding filtering of convictions please see: <u>www.gov.uk/government/publications/filtering-rules-for-criminal-record-check-certificates</u>

Any information given will be treated as confidential. You should note that disclosing a conviction does not necessarily bar you from appointment. Failure to disclose may result in withdrawal from any job offer.

Do you have any unspent and unfiltered spent criminal convictions, disqualifications, cautions or driving offences?	g
Are you barred from working with children or subject to any sanctions imposed by a regulatory body (e.g GTC/Teaching Agency)? Yes No	g .
If you have answered yes to either of the above questions, please provide dates and brief details here:	
The Authority/School is committed to safeguarding and promoting the welfare of children, young people an vulnerable adults and expects all staff and volunteers to share this commitment.	ıd
10. Immigration, Asylum and Nationality Act 2006	
All short listed applicants will be required to provide original material evidence of their Eligibility to Work in th UK. With reference to the accompanying Guidance Notes please confirm that you are able to provide the appropriate documents.	
Yes 🗌 No 🗌	
11. Health Requirements	
Appointment is subject to a satisfactory medical report from the County Occupational Health Physician.	
12. References	
One reference should relate, if applicable to your present job, or most recent employer, or a member of th School/University Academic Staff. Please state in what capacity the two referees are acting, e.g. currer employer. Please include name, address, telephone number and e-mail address if known. If you have recentl left full-time education, please ensure you include a Head Teacher/College/University Principal (or the representative) as one of your references.	nt Iy
1 st Referee Name:	
E-Mail Address: (Please provide wherever possible)	
Address:	
Telephone No: Capacity:	

2 nd Referee				
Name:				
E-Mail Address: (Please				
provide wherever possib	ole)			
Address:				
Telephone No:		Capacity:		
		Capacity.		
contacted should you be For all other posts refere	t you are applying for forms e shortlisted for interview - ple ences will be sought should yo	ease see the Not	tes for Applicants provi	ded with this form.
13. Declarations	a you related to a member of	of staff as vorma	r of the echoel or only	iona alastad ta ar
employed by Staffordshi	e you related to a member of ire County Council?	or starr, governo	r of the school of any	one elected to or
employed by Stanordshi				Yes 🗌 🛛 No 🗌
If 'Vac' places state the	ir name and position hold:			
I Tes, please state the	eir name and position held:			
the terms of The Data F used for the purpose of information you have gi	n this form will form part of The Protection Act 1998 the inform f personnel management. We iven details of in this applicati uccessful your application will	nation you give us may contact oth ion form. The info	s will be kept confident er relevant organisatior ormation will be stored	ial and will only be ns to check factual
Council, directly or indir that such canvassing v relationship with a mem relevant to the application appointment I may be lia	formation I have provided is rectly, in connection with this will disqualify me as a cand ber/officer of the Council or pr on, will also disqualify me and able to dismissal without notice oyment may be stored and pro-	application and f lidate. I further roviding informati d that if such fail e. I agree that the	urther, that I will not do understand that failur ion which is untrue or o ure/untrue information e information I give you	o so. I understand e to disclose any mitting information is discovered after in connection with
Signed:				
9				
Date:				
Werking towards equality for all Please	e remember to complete and	return the recru	itment monitoring form	O'SABLED