

**Job Application Form**



**Severndale Specialist Academy are committed to equal opportunities in employment and we positively welcome your application irrespective of your gender, race, disability, colour, ethnic origin, nationality, sexuality, gender identity, marital status, religion, trade union activity or age.**

**Guidance notes for completing this application form are available on page 11 of this document.**

**Please click the grey field to insert text. To select a check box, double click the box and select ‘Checked’.**

# Vacancy Details

|  |  |
| --- | --- |
| Position Title |  |
| Vacancy Ref. Number |  |

1. **Personal Details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Surname(s) |  | Previous Surname  (if applicable) |  | |
| Forename(s) |  | Title (e.g. Mr, Mrs) |  | |
| Address |  | Daytime Tel. No |  | |
| Evening Tel. No |  | |
| Postcode |  | Mobile Tel. No |  | |
| Email address |  | | | |
| National Insurance No |  | | | |
| Are you eligible to work in the UK | | | Yes | No |

1. **Teacher Status (for teaching applications only)**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| Do you hold Qualified Teacher Status? |  | Yes | No |
| Date Qualified Teacher Status gained: |  |  |  |
| DfE Reference Number: |  |  |  |
|  |  |  |  |
| Have you completed your induction year? |  | Yes | No |

# Application Form Source

|  |  |
| --- | --- |
| Did you hear about our vacancy through any of the following sources (please tick all that apply): | |
|  |  |
| Severndale Specialist Academy website | TES website |
|  |  |
| Hays.co.uk | Shropshire Star website |
|  |  |
| Shropshire Star Newspaper | Guardian jobs website |
| Other (Please specify) | |

1. **Present or most recent employment**

|  |  |  |
| --- | --- | --- |
| Job Title: |  |  |
| Employer’s Name and Address: |  |  |
| Period of Employment: | From: | To: |
| Reason for Leaving: |  |  |
| Notice Required: |  |  |
| Current Salary: |  |  |
| (For Teaching posts) | Main Subject Taught: Other Subject Taught: Salary point: |  |
| Brief description of responsibilities and duties: | | |
|  |  |  |

1. **Employment History**

Please provide details of your employment history, starting with your most recent and working back. Please also account for any gaps in employment.

|  |  |  |
| --- | --- | --- |
| Job Title: |  |  |
| Employer’s Name and Address: |  |  |
| Period of Employment: | From: | To: |
| Reason for Leaving: |  |  |
| Brief outline of duties: |  |  |

|  |  |  |
| --- | --- | --- |
| Job Title: |  |  |
| Employer’s Name and Address: |  |  |
| Period of Employment: | From: | To: |
| Reason for Leaving: |  |  |
| Brief outline of duties: |  |  |

|  |  |  |
| --- | --- | --- |
| Job Title: |  |  |
| Employer’s Name and Address: |  |  |
| Period of Employment: | From: | To: |
| Reason for Leaving: |  |  |
| Brief outline of duties: |  |  |

|  |  |  |
| --- | --- | --- |
| Job Title: |  |  |
| Employer’s Name and Address: |  |  |
| Period of Employment: | From: | To: |
| Reason for Leaving: |  |  |
| Brief outline of duties: |  |  |

|  |  |  |
| --- | --- | --- |
| Job Title: |  |  |
| Employer’s Name and Address: |  |  |
| Period of Employment: | From: | To: |
| Reason for Leaving: |  |  |
| Brief outline of duties: |  |  |

|  |  |  |
| --- | --- | --- |
| Job Title: |  |  |
| Employer’s Name and Address: |  |  |
| Period of Employment: | From: | To: |
| Reason for Leaving: |  |  |
| Brief outline of duties: |  |  |
|  |  |  |

# Driving

If required, continue on a separate sheet and tick here to confirm you have done so

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Do you hold a full current driving licence | Yes | No |
| If YES, what type of licence: |  |  |
|  |  |  |
| Do you have a vehicle available for work purposes | Yes | No |

1. **Education & Qualifications**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Please provide (starting with the most recent) your education and other qualifications. Please also account for any gaps in education. | | | | |
| Qualification/Subject/Course | School, College or Training Provider | Level/Grade obtained | Year Completed | |
|  |  |  |  | |
|  |  |  |  | |
|  |  |  |  | |
|  |  |  |  | |
|  |  |  |  | |
|  |  |  |  | |
| If required, continue on a separate sheet and put a cross here to confirm you have done so | | | |  |

1. **Training and Skills**

|  |  |  |
| --- | --- | --- |
| Please provide (starting with most recent) any courses that you have undertaken and which are relevant to the job you are applying for. | | |
| Course Title | Result | Year Completed |
|  | | |
|  | | |
|  | | |
|  | | |
|  | | |
|  | | |
|  | | |
| If required, continue on a separate sheet and put a cross here to confirm you have done so | | |

1. **Membership of professional bodies**

|  |  |  |  |
| --- | --- | --- | --- |
| Please state whether by election, exemption or examination | | | |
| Professional Body | Membership no. | Level/Grade | Date |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. **Languages**

|  |  |
| --- | --- |
| Please detail below if you have any language ability other than English | |
| Able to effectively converse and read |  |
| Able to converse, read and write |  |
| Totally fluent |  |

1. **Supporting Information**

|  |  |
| --- | --- |
| Please provide any additional information or comments you wish to bring to the attention of the selection panel. In this section you must ensure you demonstrate fully how you meet each of the criteria set out in the person specification of the post you are applying for including any experience, skills and abilities that you have gained, both in work and outside paid work such as voluntary / community work. You may find it helpful to address each of the criteria in turn. | |
|  | |
| If required, continue on a separate sheet and put a cross here to confirm you have done so |  |

1. **Reference Details**

Please give details of two referees, one of which must be your current or most recent employer. For Teachers, you must name your current Headteacher as Referee 1.

References will not be accepted from relatives or friends and no appointment will be confirmed without first taking up references.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Referee 1 – Current/Most Recent Employer or Educational Establishment** | | | | |
| Referee name |  | | | |
| Job Title |  | | | |
| Organisation |  | | | |
| Address |  | | | |
| Post Code |  | Tel. No |  | |
| Email address |  | | | |
| Relationship to you |  | | | |
| Can we seek this reference without further consent from you? | | | Yes | No |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Referee 2 – Previous Employer, Education or Character** | | | | |
| Referee name |  | | | |
| Job Title |  | | | |
| Organisation |  | | | |
| Address |  | | | |
| Post Code |  | Tel. No |  | |
| Email address |  | | | |
| Relationship to you |  | | | |
| Can we seek this reference without further consent from you? | | | Yes | No |

1. **Disciplinary matters**

Have you been subject to any disciplinary investigation or action including suspension from duty during your periods of employment with any employer? Include any investigations or actions taken by your professional body. Both Spent or Unspent matters need to be disclosed.

If YES, please provide details below of action taken including dates. Include any pending incident/action.

1. **Criminal convictions/Cautions/ Disqualified Persons/Investigations**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Severndale Specialist Academy regards as paramount the welfare and safety of vulnerable adults & children. Whilst criminal convictions are not necessarily a bar, this safety consideration will be key to all decisions regarding the employment of staff, approval of carers or volunteers and standards of external contractors.”  **This position is exempt under the Rehabilitation of Offenders Act 1974.**  “It is within this context, and the following guidelines, that decisions will be made in relation to applicants who have any form of criminal conviction or who are included in either the Protection of Children Act List, or the Protection of Vulnerable Adults List.”  **To assist with the implementation of this policy, all applicants are asked to complete the following questionnaire and provide written consent for checks to be completed.** | | | | | | |
| Have you ever been convicted of a criminal offence or received a police caution, reprimand or warning? |  |  | Yes |  |  | No |
| (If the answer is **YES**, please provide details: | | | | | | |
| Have you ever received a final written warning or been dismissed from your current or any previous employment (other than in a redundancy situation?) |  |  | Yes |  |  | No |
| (If the answer is **YES**, please provide details: | | | | | | |
|  |  |  |  |  |  |  |
| Has your name been added to the ISA Barred List? |  |  | Yes |  |  | No |
| (If the answer is **YES**, please provide details: | | | | | | |
| Have you ever been subject to any legal proceedings involving any social services authority or it’s equivalent, here or abroad, that has resulted in the removal of children or vulnerable adults from your care, or the imposition of a statutory supervision order? |  |  | Yes |  |  | No |
| (If the answer is **YES**, please provide details: | | | | | | |
| Have you or any person with whom you reside with ever been refused registration or cancelled from an official register of:   * Child-minders; * Day Care Providers; * Private Fostering; * Registered Care Home or Children’s Home? |  |  | Yes |  |  | No |
| (If the answer is **YES**, please provide details: | | | | | | |
| (Applicants are reminded that knowingly withholding this information, or failing to disclose subsequent information is likely to lead to immediate suspension or termination of employment or approval).  Further, applicants should note that it is a criminal offence to knowingly apply for, offer to do, accept or do any work with children when prevented either:   1. by reason of disqualification order under the Criminal Justice and Court Services Act 2000 2. by reason of inclusion in one of the Lists held by the Department of Health under the Protection of Children Act 1989 or the DfES under the Education Reform Act 1988.   I hereby give consent to Severndale Specialist Academy completing such checks as are necessary with records held by the authority and/or other agencies in order to verify the information provided above. | | | | | | |

|  |  |
| --- | --- |
| **I further understand and agree that if, for whatever reason, my application is either refused or withdrawn, but information is revealed which leads the Academy to conclude that I may pose a risk to children and/or vulnerable adults, it will keep this information for an appropriate period.**  **I understand that Severndale Specialist Academy will not reveal this information to any other organisation or individual outside of the Academy, unless it is asked a direct question about me or circumstances suggest that the protection of a child or children or vulnerable adult require immediate disclosure. I understand that, if practicable, I will be alerted to such possible disclosure and be invited to comment.** | |
| Name: | Position applied for: |
| Signed: | Date: |

**Recruitment Monitoring Form**



This form provides information used to ensure your equality details are accurate and ensuring contact can be made as and when required. Personal details are required again as this form will be removed from your application prior to interview. As a result, this information is not viewed by your manager or colleagues but is used by the organisation to review compliance with equality and diversity targets as well as helping to plan the workforce for the future.

# Personal Details

|  |  |  |  |
| --- | --- | --- | --- |
| Forename(s) |  |  |  |
| Surname(s) |  | Title (e.g. Mr, Mrs) |  |
| Date of Birth |  |  |  |

**Age Range**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 16-17 | 18-24 | 25-29 | 30-39 | 40-49 | 50-59 | 60-64 | 65+ |

**Gender**

Male

Female

**Sexual Orientation**

|  |  |  |  |
| --- | --- | --- | --- |
| Heterosexual/Straight | Gay/Lesbian | Bisexual | Prefer not to say |

**Religion and Beliefs**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Please select one religion or belief that is most suitable: | | | | | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Buddhist | Christian |  |  | Hindu |  | Jewish |  |  | Muslim |  |  | Sikh |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | No Religion |  |  |  | Prefer not to say |  |  |  |  | Other\* |  |  |  |
| \* | Please specify here |  |  |  |  |  |  |  |  |  |  |  |  |

**Ethnic Origin**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| White | White British | White Irish | | White Other\* |
| White Gypsy or Irish Traveller | | | |
| Mixed | White & Black Caribbean | | White & Black African | |
| White & Asian | | Other Mixed Ethnic Group\* | |
| Asian or Asian British | Indian | Pakistani | | Bangladeshi |
| Chinese | Other Asian or Asian British\* | | |
| Black or Black British | Caribbean | African | | Other Black or Black British\* |
| Other Ethnic Groups | Arab | | Any Other Ethnic Group\* | |
| Prefer not to say | | | |
| \*Please specify here |  | | | |

**Disability**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| The Disability Discrimination Act (1995) defines a disabled person as someone with a ‘physical or mental impairment which has a substantial and long-term adverse effect on his/her ability to carry out normal day-to- day activities’ | | | | |
|  |  |  |  |  |
| Taking this into account do you consider yourself to have a disability? |  | Yes |  | No |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| If you have answered Yes, to help identify and better understand the needs of our disabled employees, please indicate the type(s) of impairment which applies to you. | | | | |
|  |  |  |  |  |
| Hearing Impairment |  |  |  | Learning Difficulties |
|  |  |  |  |  |
| Learning Disability |  |  |  | Long standing illness or heart condition |
|  |  |  |  |  |
| Mental Health Condition |  |  |  | Mental Illness |
|  |  |  |  |  |
| Mobility Impairment |  |  |  | Neurological Condition |
|  |  |  |  |  |
| Physical Co-ordination Difficulties |  |  |  | Physical Impairment |
|  |  |  |  |  |
| Reduced Physical Capacity |  |  |  | Sensory Impairment |
|  |  |  |  |  |
| Speech Impairment |  |  |  | Visual Impairment (not corrected by  spectacles) |
|  |  |  |  |  |
| Prefer not to say |  |  |  | None |
| Other (please specify here) |  |  |  |  |
| Please note: If you have a disability that may have an effect upon your work, your health & safety at work or the health & safety of others, you must make your manager aware of this. This is so that any appropriate measures can be identified that would ensure the health & safety of you, your work colleagues or members of the public while you are at work. | | | | |

**Guidance Notes**

Every section in the application form must be completed as fully as possible, and the information provided must be accurate. We cannot accept Curriculum Vitaes (CVs). We recommend that you retain a copy of your application form so that you can refer to this, should you be invited to interview.

The main sections of the application form will ask for a variety of information relating to your work, educational and personal history. This information allows your application to be fully assessed against the criteria/competencies needed to do the job. When completing the application you should provide your entire work history, including a description of any gaps in this history. In addition you should outline all the skills, qualifications and awards you have, but these can be selective and you only need to provide those you consider relevant to the job you are applying for.

## Additional information

This is the most significant element of the application form, as this is the section where you have the opportunity to explain why you are suitable for the vacancy you are applying for. To give yourself the best opportunity of being short-listed, you should look at the criteria/competencies for the role (outlined in the Person Specification) and give examples from your personal, educational or work career that show how you can demonstrate these. If you do not meet all of the essential criteria, you are very unlikely to be invited to interview.

## Declaration of interests and relationships

We ask all potential employees to inform us of any relationships to school governors or employees. We have to do this to ensure that everyone is treated fairly and so that we can ensure there is no reason why offering a position would be unfair. For example it may be inappropriate to offer someone a position within an organisation where they work for a family member, or asking someone to take a position where they manage grants for voluntary services when their family work for a relevant voluntary organisation.

## Confirming the outcome of an application

Due to the number of applications, it is not possible to respond to them all. As a result you should assume that you have been unsuccessful if you have not heard from us within 4 weeks of the closing date for the given job. We know this is not ideal but hope you can understand why we do this. If you are successful in being called for interview, we will contact you to confirm the outcome of all additional steps of the application process, as the numbers involved are far less.

## Pre-employment Checks

If you are offered a job the offer will be conditional on satisfactory pre-employment checks, these can include: references, qualifications and other evidence e.g. driving licence, as well as a medical questionnaire, and in some instances taking a medical examination. You will also have to undergo a Disclosure Barring Service check.

## Returning your completed application

Please email your completed applications to Nic Copeland Human Resources: [Nic.Copeland@severndaleschool.co.uk](mailto:Nic.Copeland@severndaleschool.co.uk)

or via post:

Severndale Specialist Academy Nic Copeland – Human Resources Monkmoor Campus

Woodcote way Monkmoor Shrewsbury SY2 5SH

If posting this application please ensure the correct postage is paid. The academy cannot be held responsible for applications that do not arrive by the closing date. We recommend that if you send your application by email, you contact us to ensure it has been received. Also ensure you allow sufficient time for a faxed or posted copy to be sent and received before the closing date.