

Internal use only

Ref. No. _____

Date Received _____



Application Form for Non-Teaching Staff Appointment

Tove Learning Trust is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.

Application for the post of:	
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Initials		Legal surname or family name	
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Phone Number		Email address	
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Where did you see / hear this role advertised?	
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PART A

1. PRESENT POST (or most recent post if currently unemployed)

Name, address and telephone number of employer			
Outline of duties & responsibilities			
Post Held			
Status of contract (perm / temp / acting)			
Date appointed to current post		Date appointed to employer (if different)	
Current scale / point		Current Salary	
Notice required by current employer		Date available to take up appointment	

2. FULL CHRONOLOGICAL EMPLOYMENT HISTORY

Please provide a full history in chronological order since leaving secondary education.

Name, address and type of school incl. age range and NOR or employer	Position held and salary level on leaving	F/T or P/T	Dates				Reason for leaving
			From		To		
			Mth	Yr	Mth	Yr	
1							
2							
3							
4							
5							
6							

Please enclose a continuation sheet if necessary

3. EDUCATION & QUALIFICATIONS

Name & address of Secondary School	Date From	Date To	Qualifications Gained with Date and Level attained

Name of University , College OR Dept of Education attended	Date From	Date To	Full or Part-time	Qualifications or Subjects Passed with details of standard obtained

Additional Qualifications e.g. swimming awards, D of E Leaders, Coaching etc.

4. RELEVANT TRAINING

Please list relevant courses attended in the past 3 years.

Subject	Organising Body	Date(s)	Duration

5. OTHER RELEVANT EXPERIENCE, INTERESTS AND SKILLS

6. REFEREES

Give here details of two people to whom reference may be made. The first referee should normally be your present or most recent line manager or employer. If you are not currently working with children please provide a referee from your most recent employment involving children.

	First referee	Second referee
Title and Name		
Address and post code		
Telephone number		
Email address		
Job Title		
Relationship to applicant		
May we contact prior to interview?		
If No – please state clearly why this is not possible.		

7. HEALTH

Any offer of employment made by Tove Learning Trust will be conditional upon the Trust verifying the successful applicant's medical fitness for the role. Therefore if your application is successful, you will be required to complete a medical questionnaire, the response of which will be reviewed by our Occupational Health (OH) advisors before any offer of employment is confirmed. This may require a further face to face appointment or allow OH access to your medical records.

8. CRIMINAL RECORDS

COMPULSORY DECLARATION OF ANY CONVICTIONS, CAUTIONS OR REPRIMANDS, WARNINGS OR BIND-OVERS

Jobs in schools are exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974.

You must therefore declare **ANY** convictions, cautions or reprimands, warnings or bind-overs which you have ever had, whether spent or not, and give details of the offences. The fact that you have a criminal record will not necessarily debar you for consideration for this appointment.

Do you have any convictions, cautions or reprimands, warnings or bind-overs?

Please tick the relevant box

Yes No

If the answer is "yes", you must record full details in on the separate 'Disclosure of Criminal Record' Form available on our website in the same location as this application form. Please enclose it with your application form in a sealed envelope marked with your name and 'Confidential: Criminal Record Declaration'. A copy of this notice will be sent to your referees.

9. DATA PROTECTION ACT

The information collected on this form will be used in compliance with the Data Protection Act 1998. The information is being collected for the purpose of administering the employment and training of employees. The information may be disclosed, as appropriate, to Trustees, school governors, to Occupational Health, to the General Teaching Council, to the Teachers Pensions Agency, Local Government Pension Scheme, to the Department for Education and Skills, to pension, payroll and personnel providers and relevant statutory bodies. You should also note that the information you have provided on this form may be used to prevent and/or detect fraud.

10. DECLARATION

I certify that, to the best of my knowledge and belief, all particulars included in Parts A of my application are correct. I understand and accept that providing false information will result in my application being rejected or withdrawal of any offer of employment, or summary dismissal if I am in post, and possible referral to the police. I understand and accept that the information I have provided may be used in accordance with paragraph 15 above, and in particular that checks may be carried out to verify the contents of my application form

Signature of Candidate

Date

Part B

Internal Ref . No. _____

This section will be separated from Part A on receipt. Relevant contents may be verified prior to shortlisting but will not then be used for selection purposes.

1. Surname or family name	
2. All previous surnames	
3. All forenames	
4. Title	
5. Current Address	
6. Postcode	
7. Home telephone number	
8. Mobile telephone number	
9. Date of Birth	
10. National Insurance Number	
11. Have you ever been subject to an investigation or disciplinary action relating to the welfare of children?	Yes No If YES please state separately under confidential cover the circumstances and the outcome including any orders or conditions.
12. Are you subject to any legal restrictions in respect of your employment in the UK?	Yes No If YES please provide details separately
13. Do you require a work permit?	Yes No If YES please provide details separately
14. Do you have a current full driving licence?	Yes No
16. Are you related to or have a close personal relationship with any pupil, employee, or governor of Grace Academy Solihull?	Yes No If YES, you can give brief details here or you can submit separately under confidential cover.
17. Are there any special arrangements which we can make for you if you are called for an interview and/or work based assessment?	Yes No If Yes please specify, (e.g. ground floor venue, sign language, interpreter, audiotape etc).

18. ETHNIC GROUP

You are asked to complete the grid below for the purpose of monitoring applicants for employment by reference to the racial groups to which they belong. However, you are not obliged to do so.

Please tick the relevant box		✓
WHITE	British	
	English	
	Welsh	
	Scottish	
	Irish	
	Other White background	
MIXED	White and Black Caribbean	
	White and Black African	
	White and Asian	
	Other Mixed background	

Please tick the relevant box		✓
ASIAN or ASIAN BRITISH	Indian	
	Pakistani	
	Bangladeshi	
	Other Asian background	
BLACK or BLACK BRITISH	Caribbean	
	African	
	Other Black background	
CHINESE	Chinese	
OTHER ETHNIC GROUP		
NOT STATED		

19. IMPORTANT INFORMATION

When completed, this form should be returned in accordance with the instruction in the advertisement for the job or on the Notes for applicant's document in the applicant information pack.

Canvassing, directly or indirectly to the Headteacher, another employee or a governor is strictly forbidden and will immediately disqualify the application without negotiation.

Candidates recommended for appointment will be required to:

- a) complete a pre-employment medical questionnaire and if necessary, may be required to undergo a medical examination by our Occupational Health Providers.
- b) need to complete a DBS disclosure
- c) will be checked against the Record of individuals barred from working with children and vulnerable adults.
- d) provide evidence of their qualifications

20. DATA PROTECTION ACT/ GDPR

The information collected on this form will be used in compliance with the Data Protection Act 1998 and GDPR 2018. The information will be collected for the purposes of your contractual employment with the Trust, this information may be shared with the following:

Governors: for the purpose of employment and employment management

Occupational Health: for the purpose of supporting employees and employers with health related issues

TPS/LGPs: for the purpose of administering employee pensions

DfE: via census returns for statutory statistical recording

Payroll and Personnel Providers: for contractual and payroll purposes

Any other statutory body relating to your employment with us

Full details of how your data may be used is available in our privacy notice on the Tove Learning Trust website

You should also note that checks may be made to verify the information provided and may also be used to prevent and/or detect fraud.

21. DECLARATION

I certify that, to the best of my knowledge and belief, all particulars included in Part B of my application are correct. I understand and accept that providing false information will result in my application being rejected or withdrawal of any offer of employment, or summary dismissal if I am in post, and possible referral to the police. I understand that by signing this form I accept that the information I have provided may be used in accordance with paragraph 20 above, and in particular that checks may be carried out to verify the contents of my application form

Signature of Candidate

Date

Print Name