

## **Job Application Form**

Completed application forms should be returned to the school unless stated otherwise.

## **Section A**

1. Vacancy Details		
Job Title		
Vacancy ID	Applicant ID	
,	(for office use only)	
School	Closing Date	

2. Source				
www.stoke.gov.uk www.gov	/.uk/jo	bbsearch 🗌 www.wmjobs.co.uk	New	vspaper (Please specify: )
Professional Journal (Please specify:	)	Social Media (Please specify:	)	Other (Please specify: )

3. Personal Details						
Title	Mr Mrs Miss Ms Dr					
First Name(s)		Surname				
Address						
Post Code		Email Address				
Tel No. Home		Tel No. Mobile				
Date of Birth		National Insurance No.				

Qualified Teacher Status (if applicable)	Yes	🗌 No				
DfES Reference No			Date Issued			
Do you have full clean driving licence?	Yes	No	Do you have the ability to t	ravel?	Yes	No

## 4. Right to Work in the UK (Asylum and Immigration Act 1996)

If appointed you will be required to provide proof of current and valid permission to be in the United Kingdom and to do the type of work offered. A list of valid documents are available at <u>www.bia.homeoffice.gov.uk</u>

Are you able to provide the documents required?  Yes	No No
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5. Rehabilitation of Offenders
The city council welcomes applications from all candidates. Unless the nature of the work demands it, you will not be
asked to disclose convictions which are 'spent' under the Rehabilitation of Offenders Act 1974.
Do you have any unspent convictions?
If YES, please give details of the offence(s), including the date and sentence:
The Rehabilitation Offenders Act 1974 requires applicants to give details of any convictions which are not spent. Failure
to disclose such convictions could result in dismissal.
6. Criminal Convictions
Do you have any convictions, cautions, reprimands or final warnings that are not "protected" as defined by the
Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013)?
Yes No
If YES, please provide full details below including the date and nature of the offence:
The City Council will check with the DBS to see if you have any criminal convictions. For information regarding filtering of
convictions please see: <a href="https://www.gov.uk/government/publications/dbs-filtering-guidance">https://www.gov.uk/government/publications/dbs-filtering-guidance</a>

Any information will be treated as confidential. You should note that disclosing a conviction does not automatically bar you from appointment. Failure to disclosure may result in withdrawal of any job offer in relation to this form.

7. References							
Please give the name and address of two people, one of whom must be your present employer (or in the case of a newly							
qualified teache	r your training establishment and one of your p	lacements).					
1.Present / Last	Employer:						
Name		Title/ Position					
Address							
Post Code		Email Address					
Tel No.		Tel No. Mobile					
2.	2.						
Name		Title/Position					
Address	dress						
Post Code		Email Address					
Tel No.		Tel No. Mobile					

Please note – in the interest of safeguarding if your post requires you to work with children we will contact your referees prior to an interview. For all other post references will be sought on appointment

8. Declaration						
I declare that all the information I have provided is true, and I have not canvassed a member / officer of the council directly or indirectly, in connection with this application and further to that will not do so.						
Signature	Date					
To your knowledge are you related to any members / employees of the City Council? Yes No						
If YES, please sp	ecify who:					

9. Equality and	d Diversity - For monitoring purposes only						
Gender	Female Male Prefer not to say						
	Applicants should answer this question according to their current gender presentation, which may be different to that assigned at birth						
Marital Status	Single Married Civil Partner Widowed						
	Divorced Dissolved Separated Prefer not to say						
Sexual Orientation	Opposite Sex (Heterosexual) Opposite and Same Sex (Bisexual)						
	Same Sex (Lesbian / Gay) Prefer not to say						
Disability	Do you consider yourself to be disabled under the Equality Act 2010?						
	Yes No Prefer not to say						
Ethnic Origin	White Mixed Asian / Asian British   British White / Asian Pakistani   Irish White / Black African Indian   Irish Traveller White / Black Caribbean Bangladeshi   Gypsy / Roma Other / Mixed Other Asian   Other White Other / Mixed Other Asian   Black / Black British Chinese / Other Ethnic   African Chinese   Caribbean Other   Other Black   Other release state:   Prefer not to Say						
Religion / Belief	I would describe my religion and belief as:						
	No Religious Belief Prefer not to Say						

10. Education Secondary, Further (continue on a separate sheet if required)						
Name of School / College / L	Jniversity	Qualifica	ation	Subject		Grade
Professional Qualification/	Membershi	p of Profe	essional Bodi	ies inc DfES/GTC		
Name of Professional	Current L			Achievement (eg. Application	; Members	hip number
Body/Association	Members	hip	examinatio	n; invitation)		

11. Training and Development (continue on a separate sheet if required)						
Training	Date Completed	Training	Date Completed			

## 12. Supporting Information (continue on a separate sheet if required)

Please tell us why you are suitable for the job and provide as much information as you can about your skills, abilities, knowledge and experience.

13. Current / Last En	nployment * Previous	employers may be co	ontacted to validate info	ormation provided.	
Name of Employer					
Address					
Post Code			Tel No		
Job Title			Local Authority		
Date: From			Date: To		
Salary including deta	ils of allowances / I	penefits i.e.			
TLR, SEN, R&R Leade	rship Range				
Brief Description of y	our Current / Last.	Job			
Reason for leaving /v	wanting to leave			Notice Period	

14. Previous Employment * Start with the most recent (continue on a separate sheet if required).		
Name of Employer		
Address		
Postcode		Tel No.
Job Title		Salary
Date: From		Date: To
Brief Description of your role		
Reason for leaving		
Name of Employer		
Name of Employer		
Address		
Postcode		Tel No.
Job Title		Salary
Date: From		Date: To
Brief Description of your role		
Reason for leaving		
Name of Employer		
Address		
Postcode		Tel No.
Job Title		Salary
Date: From		Date: To
Brief Description of y	your role	
Reason for leaving		
Name of Employer		
Address		
Postcode		Tel No.
Job Title		Salary
Date: From		Date: To
Brief Description of your role		

If you have any gaps in your employment or education, please explain them here (continue on a separate sheet if required)

Please detail below any dates when you would not be able to attend an interview. Every effort will be made to avoid these dates but this may not always be possible.

Thank you for taking the time to complete this application form.

If you have not received any further communication within 8 weeks of the closing date, you should assume that on this occasion your application has been unsuccessful.