## **APPLICATION FORM**



### **CONFIDENTIAL**

Application for the post of \_\_\_\_\_

# Please complete the following form as fully as possible You may also attach your CV in addition to the completed application form

Surname:	Forename(s):					
(Mr, Mrs, Miss, Ms, Mx, Other):	Maiden Name/Previous Name:					
Address:		Date of occupation:				
~ during the last five years if diffe	erent from above:	Date of occupation:				
Have you lived outside of the UK	for more than 3 months in the pas	st 5 years?				
If so, please provide details below	v:					
Home Tel No:	Work Tel No:	Mobile No:				
Best time(s) and numbers to call	Best time(s) and numbers to call you?					
Email address:						
DfE Reference Number (if applica	able):					
Current Salary and Benefits:		Notice Period:				
Name of Current Employer:						

Do you have QTS	? Yes / No	Do you req	quire a work	k permit to wo	rk in the UK? Yes/No	
If yes, when does your current permit expire?						
Do you hold a cu	rrent UK dı	riving licence?	Yes / No	How long hav	ve you been driving for? Yrs	S
Existing Contacts (please indicate if yo			or governors a	nt the School, and	if so, how you know them):	
EQUAL OPPORTU	JNITIES					
As an equal oppo irrespective of th					itably skilled women and men	
Secondary Educa		rv schools/college	s vou attend	ed with dates a	and exit exam results:	
Dates		School/College(			Subjects & Results (with grades)	
Tertiary Education Please list below t			with dates ar	nd degree detail	ls:	
Please list below the universities you attended with dates and degree deta  Dates  University/Degree Body  Title & Class of degree			Main Subject(s) Principal subject first			

Graduate Indicator: (please tick)	1 – Non graduate	
	2 – Graduate equivalent	
	3 – Good honours or equivalent	
Other Academic/Vocational Qua	lifications	
Dates	Awarding Body	Grade (if appropriate)
Further Training and Developmo	ent	
	and significant training you have unde	ertaken in the last few years:
Dates	Training details	
Membership of Professional Bod	ies (if applicable)	
Dates	Institute or Association	

C	reer	. TT:		
	roor		CTO	m

Please supply a **full** history in chronological order (with start and end dates) of all training/further education, employment, self-employment, **and any periods of unemployment** since leaving secondary education.

Please provide where appropriate explanations for any periods not in employment, self-employment, or further education/training and in each case any reasons for leaving employment.

#### **Current Employer**

Name & Address of Employer	Dates from - to	Position	Reasons for leaving

#### **Career History**

Name & Address of Employer	Dates from - to	Position	Reason for leaving

Name & Address of Employer	Dates from - to	Position	Reason for leaving
mployment Gaps or compliance with Safer Recruit	mont logislation, it is impo	ortant to understand any em	unloymant gans
f you have any gaps in your emplo			
you have any gaps in your emple	ymene mstory, piedse sta	te the dates and reasons for	the gaps below.

**Career History continued** 

Interests		
Please give details of interests	, hobbies, or similar enthusiasms:	
Referees		
employer. Where you are not the employer by whom you w as soon as the short-listed	currently working with children but have ere most recently employed in work with candidates have been chosen but may	feree should be your current or most recent done so in the past, one reference must be from children. <b>Referees will be contacted formally</b> y be approached informally at any stage. If
_	•	t <u>hr@miltonabbey.co.uk</u> or on 01258 880484.
Please note, references cannot concern" will not be accepted.	be sought from a relative and photocopies a	nd references addressed "to whom it may
CURRENT EMPLOYER DETA	ILS: SECOND REFEREE:	THIRD REFEREE:
	How does this referee relate to you?	How does this referee relate to you?
Referee Name	Referee Name	Referee Name
Job Title	Job Title	Job Title
,		
Address	Address	Address
E-mail:	E-mail:	Ee-mail:
Home tel:	Home tel:	Home tel:
Work tel:	Work tel:	Work tel:
Mobile tel:	Mobile tel:	Mobile tel:

#### **Declaration**

The amendments to the Rehabilitation of Offenders Act 1974 (exceptions), Order 1975 (2013 and 2020) provides that when applying for certain jobs and activities, certain convictions and cautions are considered 'protected'. This means that they do not need to be disclosed to employers, and if they are disclosed, employers cannot take them into account.

<u>All</u> shortlisted applicants who are invited to interview will be required to complete a 'Pre-Interview Vetting Form', who will be asked of any prior convictions. If you require guidance about whether a conviction or caution should be disclosed can be found on the Ministry of Justice (MoJ) website. Additional guidance is also available from other organisations, namely:

- Nacro's Criminal Record Support Service
- <u>Unlock</u>

I understand that if my application is successful, I will be required to obtain a DBS Disclosure at enhanced level and may be asked to undergo a full medical examination.

I declare that I know of no reasons on the grounds of mental or physical health, why I should not be able to discharge the responsibilities required by the post in question and understand that any offer of employment made by the School will be conditional on verification of medical fitness.

I declare that the information I have given on this form is complete and accurate and that I am not banned or disqualified from working with children nor subject to any sanctions or conditions on my employment imposed by a regulatory body or the Secretary of State. I understand that to knowingly give false information, or to omit information, could result in the withdrawal of any offer of appointment, or my dismissal at any time in the future, and possible criminal prosecution.

Signed: Date:

If this form is being returned electronically, applicants should insert a digital signature or print their name.

In line with guidance, our school will perform an online search for shortlisted candidates as part of our due diligence checks.

Applicants who have lived or worked outside of the UK, will undergo additional checks related to prohibition and professional standards.

Candidates should <u>also</u> submit **a letter of application** of not more than two sides, stating why they are interested in the post and what relevant skills and experience they would bring to it.

Please address the letter to: Mr James Watson, Headmaster and send it <u>electronically</u> with the application form and optional CV to: the HR Team at <u>hr@miltonabbey.co.uk</u>

Please note that a CV is not acceptable as an alternative to the Application Form.

As an equal opportunities employer we welcome applications from suitably skilled women and men irrespective of their ethnic origin, disability, or sexuality.

Equal Opportunities Monitoring Form follows:

F	QUAL OPPORTUNITIES MONITO	RING	FORM		
Milton Abbey has an equal opportunity provide will be treated in the strictes of the interview selection process.					
<b>The Equality Act 2010</b> The Equality Act 2010 protects peopl	e against discrimination on the gro	ounds	of their age a	and sex.	
Female	Male			to disclose thi	s
Date of birth:					
Is the gender you identify with the sa	me as your sex registered at birth?	ı			
Yes	□No	□ I	do not wish t	to disclose thi	S
The Equality Act 2010 The Equality Act 2010 protects people		tnersh	ip.		
Please indicate the option which best	describes your marital status.				
☐ Married	Legally separated				
Single	Divorced		I do not wis	sh to disclose th	nis
☐ Civil partnership	Widowed				
The Equality Act 2010 The Equality Act 2010 protects bisex their sexual orientation.		-	e from discrir	nination on th	ne grounds of
Please indicate the option which best	describes your sexual orientation.				
☐ Heterosexual	Bisexual	l	☐ Gay		
Lesbian	Asexual	1	Pansexual		
Undecided	☐ I do not wish to disclose this				
The Equality Act 2010 The Equality Act 2010 protects disabled people, including those with long term health conditions, learning disabilities and so called "hidden" disabilities such as dyslexia. If you tell us that you have a disability, we can make reasonable adjustments to ensure that any selection processes, including interview, are fair and equitable.					
Do you consider yourself to have a di	sability or health condition?		Yes	□ No	Prefer not to say
What is the effect or impact of your d	isability or health condition on you	ır wor	k? Please wri	ite here:	

disability could be ph apply while vision was	ysical, sensory s substantially iple sclerosis, (	, or men affected or cancer	tal but must beven when we from the time	oe substan aring glass e at which	tial. F ses. It the ir	or example, weari could relate to a p	12 months or more. The ng spectacles would only rogressive condition such ects day-to-day activities,
Do you have caring res	sponsibilities?	If yes, ple	ease tick all tha	at apply;			
None		mary ca dren (und	arer of a er 18)	Prim		carer of disable	Prefer not to say
Primary carer disabled adult (18 or over	of Prima	ry carer of	older person	Secondary carer (another person carries out main caring role)			1
The Equality Act 201 The Equality Act 2010 lack of belief.		le against	t discriminatio	on on the gr	round	s of their religion o	r belief, including any
Please indicate your R	eligion or Beli	ef					
Atheism		☐ Islam	1			Other	
Buddhism		☐ Jainis	sm			No religion or be	elief
Christianity		☐ Judai	sm			☐ I do not wish to	disclose this
Hinduism	Hinduism Sikhism						
The Equality Act 201 The Equality Act 2010 nationality, ethnic or r	protects peop		t discriminatio	on on the gr	round	s of their race whic	h includes colour,
Please indicate the opt	tion which bes	t describe	es your Ethnic	Group			
Please indicate the opt	mixed/Multip	ole	es your Ethnic Asian/Asian	_	Carib	k/African/ bbean/Black sh	Other ethnic group
-	Mixed/Multip	ole s		_	Carib Britis	bean/Black	Other ethnic group
White	Mixed/Multipethnic groups	ole s Black	Asian/Asian	_	Carib Britis	obean/Black sh	
White  English	Mixed/Multipethnic groups  White and Caribbean  White and	ble s Black Black	Asian/Asian	British	Carib Britis  An  Ca  Black Carib	hribbean  hry other  k/African/ bean  ground, please	Arab  Any other ethnic group, please
White  English  Welsh	Mixed/Multipethnic groups  White and Caribbean  White and African	Black Black Asian Mixed/	Asian/Asian  Indian  Pakistani	British	Carib Britis	hribbean  hry other  k/African/ bean  ground, please	Arab  Any other ethnic group, please describe
White  English  Welsh  Scottish	Mixed/Multipethnic groups  White and Caribbean  White and African  White and  African  Any other  Multiple ethni Background, p	Black Black Asian Mixed/c	Asian/Asian  Indian  Pakistani  Banglades	British  hi  Mixed/ ic	Carib Britis	hrican  Aribbean  Aribbean  Ary other  A/African/  Abean  ground, please  ribe:	Arab  Any other ethnic group, please describe
White  English  Welsh  Scottish  Northern Irish	Mixed/Multipethnic groups  White and Caribbean  White and African  White and  Any other  Multiple ethni Background, p Describe:	Black Black Asian Mixed/c	Asian/Asian  Indian  Pakistani  Banglades  Chinese  Any other Multiple ethni Background, p	British  hi  Mixed/ ic please	Carib Britis	hrican  Aribbean  Aribbean  Ary other  A/African/  Abean  ground, please  ribe:	Arab  Any other ethnic group, please describe
White  ☐ English  ☐ Welsh  ☐ Scottish  ☐ Irish	Mixed/Multipethnic groups  White and Caribbean  White and African  White and  Any other  Multiple ethni Background, p Describe:	Black Black Asian Mixed/c	Asian/Asian  Indian  Pakistani  Banglades  Chinese  Any other Multiple ethni Background, Idescribe:	British  hi  Mixed/ ic please	Carib Britis	hrican  Aribbean  Aribbean  Ary other  A/African/  Abean  ground, please  ribe:	Arab  Any other ethnic group, please describe

For the purposes of compliance with the Data Protection Act 2018, I hereby confirm that by completing this form I give my consent to Milton Abbey School processing the data supplied above in connection with monitoring and compliance with its equal opportunities obligations and policy. I also agree to the storage of this information on manual and computerised files.

Signed: Date:

If this form is being returned electronically, a digital signature or printing of your name will suffice.