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| **Application Form for Support Staff** | | | | | | | | | | | |
| Post Applied For: | |  | | | | | |  | | | |
| Where did you see the post advertised? | |  | | | | | |  | | | |
| **Personal Details** | | | | | | | | | | | |
| Surname: |  | | | | Previous Name(s): | | | | |  | |
| Forename(s): |  | | | | Title: | | | | |  | |
| Address: |  | | | | | | | | | | |
| Home No: |  | | | | Mobile No: | | | | |  | |
| Which number are you happy to be contacted on? Home: YES / NO Mobile: YES / NO | | | | | | | | | | | |
| Email Address: | |  | | | | NI Number: | | |  | | |
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| **Present Employment (or most recent)** | | | | | | | | | | | |
| Post Title: |  | | | Date Appointed: | | | | | |  | |
| Employers Name: |  | | | | | | | | | | |
| Employers  Address: |  | | | | | | | | | | |
| Salary on Leaving: |  | | | | Allowances: | | | | | |  |
| Date Left (if applicable): |  | | | | Reason for Leaving: | | | | | |  |
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| **References (One reference MUST be from your current or most recent employer.**  **Where currently, or previously employed in a school, one reference must be from the Headteacher** | | | | | | | | | | | |
| Name: |  | | Name: | | | |  | | | | |
| Job Title: |  | | Job Title: | | | |  | | | | |
| Organisation Address: |  | | Organisation Address: | | | |  | | | | |
| Contact  Number: |  | | Contact Number: | | | |  | | | | |
| Email Address: |  | | Email Address: | | | |  | | | | |
| Relationship to Applicant: |  | | Relationship to Applicant: | | | |  | | | | |
| Character references will not be accepted, referees **MUST** only be those who can comment authoritatively on your work.  **REFERENCES WILL BE SOURCED PRIOR TO INTERVIEW FOR ALL SHORTLISTED CANDIDATES. PLEASE STATE IF THIS IS AN ISSUE IN THE ‘ADDITONAL INFORMATION’ SECTION BELOW.** | | | | | | | | | | | |

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| **Previous Employment - most recent first**  **(Please add more lines if required)** | | | | | | | | | |
| Dates: | | Employer’s Name & Address: | Post: | | | Salary (inc allowances): | | Reason for leaving: | |
| From: | To: |
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| **Education** | | | | | | | | | |
| Dates: | | Establishment Name & Address: | | | | Qualifications: | | Grade: | |
| From: | To: |
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| **Membership of Professional Organisations** | | | | | | | | | |
| Dates of Membership: | | Professional Body / Organisation: | | | Membership Level: | | | | |
| From | To |
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| **Relevant Professional Development**  **(in the last 5 years)** | | | | | | | | | |
| Dates: | | Organising Body: | | Subject: | | | Grade: | | Duration: |
| From | To |
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| **Break in Previous Employment History**  **(if applicable)** | | | | | | | | | |
| Dates: | | Reason for break: | | | | | | | |
| From | To |
|  |  |  | | | | | | | |
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| **Summary of Experience, Skills, Knowledge & Competencies** | | | | | | | | | |
| Please outline your suitability for the role by referring to the person specification and providing evidence of impact and outcomes. (maximum of 2 pages): | | | | | | | | | |

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| **Summary of Experience, Skills, Knowledge & Competencies (continued)** |
| Continue on this page. |
| **Additional Information – Maximum of 500 Words (if required)** |
| Please detail any further information you feel is relevant to your application that has not already been covered on this application: |
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| **Interview Arrangements** |
| Please indicate below any dates you would not be available for interview: |
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| **Disability / Health Conditions** |
| The Equality Act 2010 defines disability as ‘A physical or mental impairment which has a substantial and long-term adverse effect on the ability to carry out normal day-to-day activities.’  Do you consider yourself to be disabled? Yes/No |
| Please indicate below if you require any reasonable adjustments, due to a disability or health condition, to enable an interview, or which you wish us to take into account when considering your application; |

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| **Criminal Convictions & Cautions** | |
| The amendments to the Exceptions Order 1975 (2013 & 2020) provide that certain spent convictions and cautions are 'protected' and are not subject to disclosure to employers and cannot be taken into account. Guidance and criteria on the filtering of these cautions and convictions can be found on the [gov.uk](https://www.gov.uk/government/publications/filtering-rules-for-criminal-record-check-certificates) website.  Should you be shortlisted for the position, you will be required to complete a criminal records self-declaration form in order to provide any information about any unspent and unprotected criminal records that you may have.  You can view the Trust’s Recruitment of Ex-Offenders Policy [here](https://www.lifemultiacademytrust.org.uk/governance/policies/).  I understand that if I am shortlisted for the position and do not tell you about any relevant unspent criminal convictions including adult cautions, reprimands, warnings or that I am under investigation or have pending prosecutions and this is discovered after appointment, I could be dismissed without notice. | |
| Signature: | Date: |

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| **Applicant Declaration** | |
| * I confirm that the statements in this application are true, correct and accurate and that I have not omitted any facts which may have any bearing on my application. I understand that falsification of qualifications or any other information may lead to the withdrawal of any offer of employment, or dismissal where employment has already commenced. By signing this form, I agree to LiFE Multi Academy Trust using this information to consult any third parties or external organisations for the purposes of confirming and/or clarifying such information. | |
| * I understand that if I don’t tell you about any relationships with employees or governors within LiFE Multi Academy Trust and this is discovered after appointment, I could be dismissed. | |
| * In line with KCSIE 2022, LiFE Multi Academy Trust will conduct online searches on shortlisted candidates to check for suitability to work with children. I understand that these checks will be carried out if I am shortlisted. | |
| * I can produce the original documents of my identification and qualifications at the interview. | |
| * I understand that any canvassing, directly or indirectly, will be a disqualification. | |
| * I understand I must provide documents proving eligibility to work in the UK, prior to confirmation of appointment. | |
| * I am prepared to undergo a medical assessment, prior to confirmation of appointment. | |
| Signature: | Date: |

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| **Data Protection Act** |
| The information you supply when requesting a job pack will be held for monitoring and evaluation purposes and in connection with any future contact. When you sign and return this form you are giving your permission to process and hold the information you have supplied on it, including any information you consider to be personal and sensitive. If your application is unsuccessful, the form will be held for up to 6 months and then destroyed. |