**Teaching application form – Newham Community Learning**

Thank you for your interest in a teaching position at our school, which is part of Newham Community Learning. We look forward to hearing from you.

Please complete ALL sections of this form, including the declaration, save it, and then email it to Click or tap here to enter text. on Click or tap here to enter text.

This form has been designed to be completed electronically – ie. please open in Word, and type in your responses where indicated. If this is not possible, please contact Click or tap here to enter text. who will email you a copy of the form in a printable format. Should you have any special requirements and/or require reasonable adjustments to enable you to complete this form and/or during the recruitment process, please contact Click or tap here to enter text.

*Note that Section 14 will be removed from your application prior to the shortlisting process.*

**Section 1 – Personal details**

Title: Choose an item. First name: Click or tap here to enter text. Surname: Click or tap here to enter text.

Previous names: Click or tap here to enter text.

Address: Click or tap here to enter text.

Phone (mobile): Click or tap here to enter text. Phone (alternative/additional number): Click or tap here to enter text.

Email address: Click or tap here to enter text.

National insurance number: Click or tap here to enter text.

Do you require permission to work in the UK (click in the box to select)? Yes [ ]  No [ ]

If you require permission, is this subject to a work permit/worker registration scheme? Yes [ ]  No [ ]

Do you wish to apply for the job on a job-share basis? Yes [ ]  No [ ]

If you wish to job-share, and have a job-share partner in mind, please provide their name below:

Title: Choose an item. First name: Click or tap here to enter text. Surname: Click or tap here to enter text.

**Section 2 – Present employment** (if currently employed)

Name of employer: Click or tap here to enter text.

Address of employer: Click or tap here to enter text.

Current job title: Click or tap here to enter text. Date appointed: Click or tap here to enter text.

Current salary range: Click or tap here to enter text. Current salary: Click or tap here to enter text.

Notice required: Click or tap here to enter text. Allowances received: Click or tap here to enter text.

Reason for leaving: Click or tap here to enter text.

Please indicate whether or not you are happy to be contacted at work? Yes [ ]  No [ ]

**Section 3 – Brief outline of duties in your current role** (or your most recent job)

Outline of duties: Click or tap here to enter text.

**Section 4 – Previous employment**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Employer | Start date | End date | Job title | Reason for leaving |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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**Section 5 – Breaks in employment history**

|  |  |  |
| --- | --- | --- |
| Break start date | Break end date | Reason for break  |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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**Section 6 – Ability to travel** (if required)

Do you have a valid driving licence? Yes [ ]  No [ ]

Do you have access to a vehicle which you are able to use for work purposes? Yes [ ]  No [ ]

If not, are you able to travel, for work purposes, by another means of transport? Yes [ ]  No [ ]

**Section 7 – Secondary school education** (please list most recent first)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| School name | From (date) | To (date) | Qualifications obtained  | Grade | Date grade awarded |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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**Section 8 – Continuing education** (university, college, apprenticeship etc.)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of establishment | From (date) | To (date) | Qualifications obtained (and awarding body) | Grade | Date grade awarded |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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**Section 9 – Professional qualifications** (to include details of professional association membership)

Do you hold Qualified Teacher Status (QTS)? Yes [ ]  No [ ]

If ‘yes’, please provide your Teacher Reference Number: Click or tap here to enter text.

Please provide the dates of your NQT Statutory Induction Period (if qualified since August 1999):

Start date: Click or tap here to enter text. Completion date: Click or tap here to enter text.

**Section 10 – Other relevant training and development** (attended in the last five years; please list most recent first)

|  |  |  |
| --- | --- | --- |
| Brief description or title of course | Date attended | Organising body |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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**Section 11 – Information in support of this application** (please use the person specification provided in the Pack as a prompt to describe the experience, skills, competencies and qualifications that make you a strong candidate for this role. These may have been gained through your work experience, or through any voluntary or community work for any organisation that you may have been involved with. You should ensure that any information submitted reflects your experience in relation to the person specification for this role.)

Information in support of this application: Click or tap here to enter text.

**Section 12 – References** (please give the name and address of your two most recent employers. If you are unable to do this, please clearly outline your relationship to the referees provided. Applicants must ensure that referees consent to be contacted, and for reference information to be held for a period of six months).

|  |  |
| --- | --- |
| Referee 1 | Referee 2 |
| Name: Click or tap here to enter text. | Name: Click or tap here to enter text. |
| Physical address: Click or tap here to enter text. | Physical address: Click or tap here to enter text. |
| Relationship to applicant: Click or tap here to enter text. | Relationship to applicant: Click or tap here to enter text. |
| Period of time the referee has known the applicant (years): Click or tap here to enter text.  | Period of time the referee has known the applicant (years): Click or tap here to enter text.  |
| Email address: Click or tap here to enter text. | Email address: Click or tap here to enter text. |
| Contact number: Click or tap here to enter text. | Contact number: Click or tap here to enter text. |

Applicants to note:

* Referees will be contacted prior to interviews taking place.
* The school may seek your consent to contact additional referees.
* We do not accept references from family members or from people writing solely in the capacity of a friend.

**Section 13 – Close personal relationships** (please read carefully and provide the information requested)

Are you a relative or partner, or do you have a close personal relationship with, any employee, trustee of governor of the establishment to which your application is being made? Note that this includes Newham Community Learning and our schools.

Yes [ ]  No [ ]

If ‘yes’, please:

Provide the name of the person: Click or tap here to enter text.

Describe the nature of the relationship: Click or tap here to enter text.

Applicants to note:

* Failure to disclose a close personal relationship with anyone associated in any way with the list of establishments above may disqualify you from applying for this position.

**Section 14 – Declarations and disclosures** (please read carefully and provide the information requested)

Applicants to note:

* By clicking in the box below, and by submitting this application form as per the instructions provided on the first page, you are certifying that the information that you have provided is accurate and the at the declarations you have made this section are, to the best of your knowledge and understanding, true.
* The provision of any false information will result in the withdrawal of any potential subsequent offer of employment.
* Should any information provided be established to be false once an applicant has started work, the school’s disciplinary policy will be followed.

**[To complete] - Declaration**: I certify that the information that I have provided on this form is, to the best of my knowledge and understanding, true:

Confirmation (tick checkbox): Yes [ ]

**[To note] - Disclosure of criminal convictions**: please note that preferred candidates will be asked to complete a Self-Disclosure Form to disclose whether they have:

* any unspent conditional cautions or convictions under the Rehabilitation of Offenders Act 1974; or
* any adult cautions (simple or conditional) or spent convictions that *are not* protected as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975, as amended (the “Exceptions Order”)

The amendments to the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975, as amended (the “Exceptions Order”) mean 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. Details are provided in the Trust’s Safer Recruitment Policy, which is published on the [Policies Page](https://newhamcommunitylearning.org/?page_id=1649) of our website. Any information disclosed will be treated in the strictest confidence.

Where appropriate for the role, a disclosure/status check will be sought from the Disclosure and Barring Service (DBS) in the event of a successful application. A person’s criminal record will not in itself be a bar to obtaining employment, save in the case of management positions where a S128 Direction issued by the Secretary of State will prohibit employment.

**[To complete] – Safer recruitment: childcare disqualification checks (Primary Applications only)**: I certify that I am not disqualified from working with children or subject to any sanctions imposed by a regulatory body which would prohibit or restrict me from applying for this position.

Confirmation (tick checkbox): Yes [ ]

Applicants to note:

* Preferred candidates applying for a relevant post in a school setting covered by the Childcare (Disqualification) Regulations 2018 (‘the Regulations’) will be asked to complete a Disqualification Declaration Form.
* A disqualified person may only be employed in a relevant post if they obtain a waiver from Ofsted. A copy of the Disqualification Declaration Form [is available here](https://forms.gle/Zv6XUY4aftQEf5az5) if you wish to review this prior to submitting your application.

**[To complete] – Data protection**: I confirm that I have read and understood the bulleted statements provided under the heading ‘applicants to note’ below:

Confirmation (tick checkbox): Yes [ ]

Applicants to note:

* I acknowledge that by completing this form, the school will hold and process personal data (including special categories of data - eg. information about health) about me in line with the provisions of relevant school policies.
* I acknowledge that the school will store this information securely, and will process it for the duration of the recruitment process.
* I acknowledge this information will only be shared in line with the provisions explained in the [Trust’s Privacy Notice.](https://newham.wpengine.com/wp-content/uploads/2022/09/Newham-Community-Learning-Privacy-Notice-July-2022.pdf)
* I acknowledge that if I am the successful applicant, this information will be retained in line with the school’s retention schedule. If I am not successful, I acknowledge this information will be retained by the school in a secure electronic/paper system for no longer than six months from the date of the appointment to the position.

**Section 15 – Recruitment Source and Equality and diversity monitoring** (please read carefully and provide the information requested. Please note that the information you provide in this section of the application will be treated in the strictest confidence and is subject to current data protection legislation in the UK. As described on the first page of this application form, the information provided in Section 16 will be used for statistical purposes only and will be removed from your application prior to shortlisting. It will thus not form part of the selection process).

Please use the drop-down list to tell us where you heard about this vacancy: Choose an item.

Thank you for your interest in our school. We look forward to hearing from you.

*Note that all the information collected in this section is in line with ACAS (Advisory, Conciliation and Arbitration Service) guidance (2020). As per ACAS guidance, completion of this section of the application form is voluntary.*

**Ethnic monitoring** – please select the checkbox which you feel best describes your ethnicity:

|  |  |
| --- | --- |
| Ethnicity | Click in checkbox to select |
| **White** |  |
| English, Welsh, Scottish, Northern Irish or British |[ ]
| Irish |[ ]
| Gypsy or Irish Traveller |[ ]
| Any other White background |[ ]
| **Mixed or Multiple ethnic groups** |  |
| White and Black Caribbean |[ ]
| White and Black African |[ ]
| White and Asian |[ ]
| Any other Mixed or Multiple ethnic background |[ ]
| **Asian or Asian British** |  |
| Indian |[ ]
| Pakistani |[ ]
| Bangladeshi |[ ]
| Chinese |[ ]
| Any other Asian background |[ ]
| **Black, African, Caribbean or Black British** |  |
| African |[ ]
| Caribbean |[ ]
| Any other Black or African or Caribbean background |[ ]
| **Any other ethnic group** |  |
| Arab |[ ]
| Any other ethnic group |[ ]
| **Other** |  |
| None of the above categories apply |[ ]

**Do you consider yourself disabled?** (*The Equality Act 2010 describes ‘a disability’ as a ‘substantial or long term physical or mental impairment or health issue which could adversely affect your ability to carry on normal day to day activity’).*

Yes [ ]  No [ ]

If you answered ‘yes’, please describe the nature of your disability: Click or tap here to enter text.

**Gender**: Choose an item.

**Sexual orientation**: Choose an item.

**Please confirm which age range bracket you fall into:** Choose an item.

*Please save this completed application, and then attach it to an email it as instructed in the introductory section.*