

Simon Balle All-through School Application Form Teaching Staff

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Post	App	iiea	TOF

PLEASE COMPLETE IN BLACK TO FACILITATE PHOTOCOPYING

You are requested to complete this form (using supplementary sheets if there is insufficient space for any entry). **All sections must be completed.**

PERSONAL DETAILS (block capitals please)

Surname	Preferred Title
First Name(s)	Previous Surname (if applicable)
Home Address	Present Address (if different)
Post Code	Post Code
Telephone (Home)	Telephone (Work)
Telephone (Mobile)	Email
CURRENT ENABLOVACATALT (*)	
	ot currently employed as a teacher, please give details)
Name of Establishment	Employer
Type of school	Key Stage/s
Post held	Date appointed
Pay scale	Total annual salary
If your salary includes additional paym	ents, what are they and what is their value (eg TLR of £4,000)
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PREVIOUS EMPLOYMENT DETAILS

Please list in chronological order, with precise dates if possible, as this information may be used to assess salary.

a) In Education (Supply teaching appointments need not be listed individually)

From	То	Establishment / Type of school	Post and Grade	Reason for Leaving

b) Outside Education

From	То	Employer	Post and Grade	Reason for Leaving

EDUCATION/QUALIFICATIONS

Please give details of your education including any professional qualifications, <u>starting with the most recent</u> <u>attained.</u>

a) Higher Education

Dates At (state full/)		Name of University or other	Qualifications gained		
From	То		Level and Subject (eg BA Hons, PGCE)	Grade	Date achieved

b) Secondary School Education

Dates A (state full/	ttended part time)	Name of School or College	Qualifications gained		
From	То		Level and Subject	Grade	Date achieved
			(eg A Level Maths)		

c) Other	Qualificat	ions Obtained					
Course a	nd Organis	ing Body	Qualif	ication		Date a	chieved
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LEISURE Please sta	E INTERES	S TS what your main leisure interests		From Month	Year	Month	Year

Name of	Current Level of	Membership Numb	
Institute/Professional Body	Membership	_	of your involvement with these
	(eg corporate)	bodies (eg attendan	ice at meetings)
TRAINING AND DEVELOP	 MFNT		
Please include details of any t		s) and development (s	necial projects, personal
development courses) releval			
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ADDITIONAL INFORMAT	ION (for salary and pension	nurnoses)	
	Territor salary and pension	pu. posco,	
National Insurance Number		Teacher Reference nu	ımber (DfE)/
Date of Recognition*			
*If this would be your first to	ashing appointment in a M	aintained School in Fr	agland or Wales, please attac
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_	e DfE granting you Qualified	Teacher Status.	Yes/No

Yes/No

Yes/No

If Yes, please provide date

If Yes, please provide date

Have you elected to OPT-OUT of the Teachers' Superannuation Scheme?

Have you elected to participate in the Part-Time Teachers' Superannuation

Scheme?

MEMBERSHIP OF PROFESSIONAL BODIES

Have you elected to pay additional Superannuation Contributions through the Teachers' Scheme?	Yes/No If Yes, please	provide date
If yes, please indicate whether these are		
i) Widower's Contributions	Yes/No	%
ii) Purchase of Past added Years	Yes/No	%
iii) Additional voluntary contributions via Prudential Assurance Co.	Yes/No	%

Please attach a copy of the Teachers' Pensions notification as appropriate.

Status

REFERENCES

1) Name

Address

dismissal without notice.

Signature

Please give the names, addresses and status of two referees who may be approached now. If you are currently employed as a teacher, one referee **must** be your present Headteacher. **References from friends or relatives are not acceptable.**

Telephone	Email		
2) Name		Status	
Address			
Telephone	Email		
If you are known to the referees by another naradvise that we may be in contact.	me (eg previous name) please	e inform them of you	r present name and
From what source did you learn of this vacai	ncy?		
Are you a relative or partner of any employed	e or governor of the Schoo	1?	Yes/No
If yes, please give details			
Has someone else completed this form on yo	our behalf?		Yes/No
If yes , please provide the person's name and	an explanation		

I certify that the information given above and overleaf is correct to the best of my knowledge. I accept that if any of the enclosed information is found to be untrue or misleading after my appointment, I may be liable for

Date		

In the interests of economy, receipt of this application may not be acknowledged unless specifically requested (in which case please enclose SAE)

PLEASE ALSO SUBMIT A LETTER OF APPLICATION OUTLINING WHY YOU CONSIDER YOURSELF SUITABLE FOR THIS POST (eg knowledge, experience, skills and abilities)