



Colnbrook C. of E. Primary School

Headteacher: Mr Tom Brunson

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STRICTLY PRIVATE AND CONFIDENTIAL				
POST TITLE:		CLOSING DATE:		
NON-TEACHING APPLICATION FORM				
<i>Please complete this form and return by e-mail to angela.ford@colnbrookprimary.com or by post to: Angela Ford, Colnbrook C. of E. Primary School, High Street, Colnbrook, Berks, SL30JZ. Please use blue or black ink.</i>				
Surname		Other Names		
Previous Surnames		Preferred Title (eg Mr, Miss, Mrs, Ms)		
Home Address		Home Telephone		
		Mobile Telephone		
Postcode		Work Telephone (if it is convenient for contacting you)		
Email Address		N.I. Number		
Do you need a certificate of sponsorship?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Do you hold a full current driving licence?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Do you have the daily use of a car?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Have you previously sought employment with Colnbrook C. of E. Primary School?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If YES, please give details				
PRESENT EMPLOYMENT				
<i>(if currently unemployed please give details of last employer and date of leaving)</i>				
Name, address and telephone number				
Date of commencement		Job Title		
Please give a brief description of your duties				
Present basic salary		Notice required		
Additional payments or benefits				
If last employer please state reason for leaving and leave date				



EMPLOYMENT HISTORY

Please list your work experience since leaving full time education. Start with the most recent employer
Please use separate sheet if necessary.

Dates DD/MM/YY		Employer's Name & Address	Job Title Brief summary of duties and reason for leaving
From	To		

Voluntary/Unpaid Activities

From	To	Position	Brief details of duties

Periods when not employed

Please provide details of periods of unemployment and reasons for these

From	To	Reason

SECONDARY EDUCATION

(you may be asked to produce certificates)

From	To	Name & Address of School	Examinations Passed		
			Awarding body	Qualification	Grade

FURTHER EDUCATION*(you will be asked to produce certificates)*

Dates From	To	Name & Address of College or University	Examinations Passed		
			Awarding Body	Qualification	Grade

Other Qualifications held including vocational qualifications**Dates Awarded**

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Are you a member of a professional body? Yes No
 If yes, please specify

What are your general interests?

Rehabilitation of Offenders Act 1974

All posts involving direct contact with children are exempt from the Rehabilitation of Offenders Act 1974. However, amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are 'protected'. These 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 Disclosure and Barring Service website.

Shortlisted candidates will be asked to provide details of all unspent convictions and those that would not be filtered, prior to the date of the interview. You may be asked for further information about your criminal history during the recruitment process. If your application is successful, this self-disclosure information will be checked against information from the Disclosure & Barring Service before your appointment is confirmed.

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 details in a separate, sealed envelope

Disclosure of convictions will not necessarily be a bar to employment but failure to disclose this information could result in dismissal if subsequently discovered.

People with disabilities, please note - People with disabilities are guaranteed an interview if they meet all of the essential requirements of the person specification. If you consider yourself to have a disability to be taken into account during the recruitment and selection process, please explain what assistance you would like to receive:

Would you require any type of adjustments to working arrangements or the work environment to assist you in overcoming any disadvantage or disability?

Yes No

If yes, please give details

REFERENCES

Please give the names and addresses of two referees, one of which **MUST** be your present or last employer or Head Teacher/tutor if a school or college leaver. If your work does not currently involve working with children however you have worked with children in the past, please provide details of a suitable referee from the organisation where you most recently worked with children.

Current Employer Referee:	Second referee:
Telephone Number	Telephone number
Email address	Email address
Relationship to you	Relationship to you
Please be advised that references will be requested as a result of shortlisting.	Please be advised that references will be requested as a result of shortlisting.
<p>I confirm that the above information is complete and accurate and I understand that any offer of employment is subject to a) references which are satisfactory to the school b) a satisfactory DBS certificate and check of the Barred list c) the entries on this form proving to be complete and accurate and d) a satisfactory medical report, if appropriate. I confirm that I have not been disqualified from working with children, cautioned or sanctioned in this regard.</p> <p>In accordance with the requirements of GDPR and Data Protection Act 2018, I agree that the school may use and process the information on this form as necessary, and for any legitimate purposes of the School.</p>	
Signed:	Date:

PERSONAL STATEMENT

Please give your reasons for applying for this position. Outline the skills, experience and personal qualities that are relevant to your suitability for the advertised post, and how you meet the person specification.

RECRUITMENT MONITORING FORM

STRICTLY CONFIDENTIAL

This sheet will be separated from your application form upon receipt and does not form part of the selection process.

Application for the post of: *	*This field must be completed.
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Colnbrook C. of E. Primary School aims to be an equal opportunities employer, and selects staff on merit, irrespective of race, colour, nationality, ethnic or national origins, gender, marital status, family responsibility, age, disability, sexual orientation, trade union activity, or religious belief. In order to monitor the effectiveness of our equality policy, the Council requests that all applicants complete this form. In accordance with GDPR and Data Protection Act 2018, the information you have provided will only be used for the purposes of equality monitoring. The information will be used in summary form only and may inform improvements to our equality policy.

What is your Ethnic Group

Choose ONE section from A to F, then tick the appropriate box.

A. White

British

Irish

Any other White background, please write in:

D. Black or Black British

Caribbean

African

Any other Black background, please write in:

B. Mixed

White and Black Caribbean

White and Black African

White and Asian

Any other Mixed background, please write in:

E. Chinese or other ethnic group

Chinese

Other, please write in

F. I do not wish to provide this information.

C. Asian or Asian British

Indian

Pakistani

Bangladeshi

Sikh

Any other Asian background, please write in:

Gender Male Female

Disability – Do you have a disability? Please tick one box.

- | | | | |
|--|--------------------------|--|--------------------------|
| 00 - None. | <input type="checkbox"/> | 06 - You have mental health difficulties. | <input type="checkbox"/> |
| 01 - You have a specific learning difficulty (for example dyslexia). | <input type="checkbox"/> | 07 - You have a disability that cannot be seen, for example diabetes, epilepsy or a heart condition. | <input type="checkbox"/> |
| 02 - You are blind or partially sighted. | <input type="checkbox"/> | 08 - You have two or more of the above. | <input type="checkbox"/> |
| 03 - You are deaf or hard of hearing. | <input type="checkbox"/> | 09 - You have a disability, special need or medical condition that is not listed above. | <input type="checkbox"/> |
| 04 - You use a wheelchair or have mobility difficulties. | <input type="checkbox"/> | 10 - I do not wish to provide this information. | <input type="checkbox"/> |
| 05 - You have Autistic Spectrum Disorder or Asperger Syndrome. | <input type="checkbox"/> | | |

Present Status

Internal Applicant External Applicant

Date of Birth

(dd/mm/yyyy) Age

Media

Please state where you saw this post advertised:

- Slough vacancy bulletin
- Colnbrook School website
- Greensheets
- Other website, please state:
- National newspaper, please state:
- Local newspaper, please state:
- Professional/trade journal, please state:
- Other, please state: