

APPLICATION FORM

AYSGARTH SCHOOL



CONFIDENTIAL

Please complete the following form as fully as possible.

The information requested below complies with the recommendations in the DCSF document 1568/2005 Safeguarding Children (Safer Recruitment and Selection in Education Settings)

Surname:	Forename(s):			
	Previous Name:			
Address:		Date of occupation:		
~ during the last five years if diffe	erent from above	Date of occupation:		
a during the last live years if diff		Date of occupation.		
Telephone numbers:				
Best time(s) and numbers to call you?				
Email address:				
Date of Birth (optional):	National Insurance Number:	DfE Reference Number:		
Current Salary and Benefits:		Notice Period:		
Name of Current Employer:				
Do you require a work permit to work in the UK Yes/No				
If yes, when does your current permit expire?				
Existing Contacts within School (please indicate if you know any existing employees or governors at the School, and if so how you know them):				
How did you hear about this vacancy?				
EQUAL OPPORTUNITIES				
As an equal opportunities employer we welcome applications from suitably skilled women and men irrespective of their age, marital status, religion or belief, ethnic origin, disability, sexuality or gender reassignment.				

Secondary Educa Please list below t		ry schools/college	s you attended, with date	es and	exit exam results:	
Dates		School/College(s)		R	Results (with grades)	
Tertiary Education Please list below t		ties you attended v	with dates and degree de	tails:		
Dates University/Degree		y/Degree Body	Title & Class of degree		Main Subject(s) Principal subject first	
Graduate Indicator: (please tick) 1 – Non graduate						
	2 – Graduate equivalent		aduate equivalent			
3 – Good honours or equivalent						
Other Academic/	/Vocational	Qualifications:				
Dates: Awarding		Body:	Grad	Grade (if appropriate):		
Further Training Please give details		-	nt training you have unde	ertake	en in the last few years:	
Dates	Dates Training details					
Membership of Professional Bodies (if applicable)						
Dates	Pates Institute or Association					
	employmen				s) of all training/further education, ds of unemployment since leaving	

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.

Employer	Date from/to	Position	Reason for leaving		

Interests

Please give details of interests, hobbies or similar enthusiasms:

Referees

Please provide details of at least two referees. One referee should be your current or most recent employer. Where you are not currently working with children but have done so in the past, one reference must be from the employer by whom you were most recently employed in work with children. Referees may be contacted formally as soon as the short-listed candidates have been chosen.

Please note, references will not be accepted from relatives or from referees writing solely in the capacity of friends.

Name	Name
Address	Address
Telephone	Telephone
Home:	Home:
Work:	Work:
Mobile:	Mobile:
e-mail:	e-mail:

Declaration:

I am aware that the post for which I am applying involves contact with children and is exempt from the Rehabilitation of Offenders Act 1974 and all subsequent amendments (England & Wales), and I must therefore declare all convictions, cautions and bind-overs, including those regarded as 'spent'.

Have you ever been convicted of any offence or 'bound-over' or given a caution? Yes / No

If yes, please give details on a separate sheet and send in a sealed envelope marked 'Confidential Disclosure' to The Head, Aysgarth School, Newton-le-Willows, Bedale, North Yorkshire DL8 1TF. The envelope will only be opened, and the contents read, by the Head if your qualifications and previous experience render you suitable for interview.

I understand that if my application is successful I will be required to obtain a DBS Disclosure at enhanced level.

I declare that I know of no reasons, why I should not be able to discharge the responsibilities required by the post in question.

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:

Candidates should <u>also</u> submit **a CV, a hand written 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 and a recent photograph.

Electronic submission to <u>kwiggins@aysgarthschool.co.uk</u> is acceptable, including the scanning of the handwritten letter.

Please note that a CV is not acceptable as an <u>alternative</u> to the Application Form and a CV on its own is not sufficient without a completed Application Form for safer recruitment. Please note that the school will complete online searches as part of their due diligence to safer recruitment of shortlisted candidates.

Equal Opportunities Monitoring Form follows:

EQUAL OPPORTUNITIES MONITORING FORM				
Aysgarth has an equal opportunities policy and is keen to ensure that it is working efficiently. The information you provide will be treated in the strictest confidence and will be used only for statistical monitoring and is not used as part of the interview selection process.				
(Please tick the appropriate box)				
1) 🗌 Female 🗌 Ma	Female 🗌 Male			
2) Date of birth:				
3) I am a person with disab	I am a person with disabilities:			🗌 No
	If yes, does your disability have a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities?			🗌 No
"Long-term" effects are effects which have lasted at least 12 months or are expected to last 12 months or more. The disability could be physical, sensory or mental but must be substantial. For example, wearing spectacles would only apply while vision was substantially affected even when wearing glasses. It could relate to a progressive condition such as HIV infection, multiple sclerosis or cancer, from the time at which the impairment first affects day-to-day activities, so long as it is ultimately expected to result in substantial impairment.				
3) Ethnic Origin – Please indicate below:				
🗌 Pakistani	Any other Asian background	Caribbean		
🗌 Ghanaian	🗌 Nigerian	Somali		
Other Black background	Any other Black background	Chinese		
☐ Vietnamese	British	☐ Irish		
Traveller Irish	🗌 White European	Turkish/Turkish Cypriot		
☐ White other	Gypsy/Romany	White/Asian		
White/Black African background	White/Black Caribbean	Any other mixed		
		Refused		

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For the purposes of compliance with the Data Protection Act 1998, I hereby confirm that by completing this form I give my consent to Aysgarth 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: