

Office use only

App no:

APPLICATION FOR APPOINTMENT AT	Γ:	SCHOOL		
Applicants are required to complete ALL parts of this form Please refer to the candidates guide for completion of this application form				
Application for the post of:				
Are you applying for this post on a Job Share basis	? YES / N	10		
Surname(s) (Block Capitals)	Initials:			
Permanent address				
Contact Numbers:	Home:			
	Work:			
	Mobile:			
Email:				
National Insurance Number:				
Address for correspondence (if different from permanent address)				
nom permanent addressy				
When could you commence duties if appointed?				
DISCLOSURE INFORMATION (on for)	ly required if a	DBS check is required for the post applied		
Do you hold a DBS Certificate?		*YES NO		
Have you subscribed to the update service?		*YES □ NO □		
If yes:		Certificate Number:		
		Date of Certificate:		
Please indicated level of check		*Standard or Enhanced		
Please indicate workforce to which it applies		*Child		

Dates		Name of Course and Secondary	Qualifications obtained	
rom	То	School/College/University Attended	Qualificacions obtained	
details of	Education Confidence of additional training (full or page)	ourses Ing which is relevant to the role you are applying for art time) and name of organising body.	and any courses attended; please include dates,	
details of	f additional traini	ng which is relevant to the role you are applying for	and any courses attended; please include dates,	
e details of	f additional traini uration (full or pa	ng which is relevant to the role you are applying for art time) and name of organising body. Ssional / Technical Bodies		
e details of	f additional traini uration (full or pa	ng which is relevant to the role you are applying for art time) and name of organising body. Ssional / Technical Bodies	and any courses attended; please include dates, Grade(s) / Class of Membership	
e details of	f additional traini uration (full or pa	ng which is relevant to the role you are applying for art time) and name of organising body. Ssional / Technical Bodies		
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Give details (including dates) of Secondary Schools, Colleges and Universities attended and particulars (including dates) of Qualifications

Education (Applicants should be prepared to produce evidence of qualifications held)

Current Post (or last employment where applicable)								
Name and Employer:	Address of							
Dates of Er	nployment	Fro	om: o:					
Job Title								
Brief Detail Responsibil								
Scale	lary and Sala							
alternative	leaving/seeki employment	t						
	ent Histor	_						
Please list i		cal order a	and account for a	ıny gaps ir	employment ir	icluding any vo	untary work undertaken	
From	To		Employer	Job	Title and Main Du	ities of Role	Reason for leaving	

Referees:	
State position, status, names and addresses of <u>two</u> independent referees must be your current or most recent employer. (Please refe	
Referee I	Referee 2
Name:	Name:
Position:	Position:
Address:	Address:
Post Code:	Post Code:
Tel No:	Tel No:
Email:	Email:
Can this referee be contacted prior to interview? YES/NO	Can this referee be contacted prior to interview? YES/NO
Please note that an offer of appointment is conditional upon i	receipt of a least two satisfactory references
Disability	
We are positive about disability and welcome applications from disability which we include to establish whether we need to make process; take positive action in supporting employment for disate a function that is intrinsic to the work concerned and/or establish requirement (Section 60 of the Equality Act 2010 refers.) As a any applicant who declares a disability as detailed on the A (minimum) criteria for the Job.	ake adjustments to enable you to take part in the selection bled people; establish whether you will be able to carry out olish that you have a disability where this is an occupational Disability Symbol User, the school undertakes to interview
Do you consider yourself to be a person with a disability	y as described by the Equality Act 2010?
☐ Yes ☐ No	

Additional Information
Please state your reasons for applying for this role
Please provide details of the skills, knowledge and experience that makes you suitable for this role. (Please make reference to the person specification and include examples where possible)

Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975 (2013) / Prohibition of Teachers			
The position for which you are applying involves contact with children and is exempt from the Rehabilitation of Offenders Act 1974 and all subsequent amendments (England & Wales). You are not therefore entitled to withhold information about <u>unspent</u> cautions, 'bindovers' or any criminal convictions including any that would otherwise be considered 'spent' under the Act.			
Have you ever been convicted of any offence or 'bound-over' or given a caution? Yes No			
If Yes, please provide details on a separate sheet and attach it to this application form in a sealed envelope marked 'Confidential Disclosure'			
I understand that if my application is successful I will be required to obtain a DBS Disclosure at the appropriate level.			
Have you ever been prohibited from teaching by the Secretary of State?			
Childcare Disqualification Regulations 2018			
Have you ever been disqualified under the Childcare Disqualification regulations in the Childcare Act 2006?			
Eligibility to Work in the United Kingdom			
To ensure this school complies with legislation, you will be required to provide documentary evidence showing that you are entitled to work in the United Kingdom.			
Are there any restrictions regarding your right to work in the UK?			
If yes, please give details:			
Privacy Statement			
All information collected on this form is processed in accordance with GDPR REC 4.1.4 Privacy Notice Vision Workforce. This can be read on http://valt.org.uk/trust/privacy-policies/staff-privacy-notice/ . A print version is available on request.			
The personal data collected will be used to consider your application for employment within Vision Academy Learning Trust. If you are shortlisted, contact will be made with the referees you supply on this form and a confidential reference will be sought from them.			
Recruitment Equality Monitoring			
The monitoring of applications for the purpose of equal opportunities is a practice recommended by the Equality and Human Rights Commission. Vision as an employer is obliged by the Public Sector Equalities Duty to uphold the Equalities Act 2010. We request equality monitoring information on the Recruitment Equality Monitoring Form; this is submitted anonymously on the following page. You may choose to withhold this information if you wish.			
Relationships			
If you are related to any Elected Member or senior officer of The VISION Academy Learning Trust, a member of the Senior Leadership Team within School or a member of the schools Governing Body, please state below his/her name(s) and the relationship. (This does not prevent such persons from giving as a reference a written testimonial of your ability, experience or character, for submission to the School with your application for employment).			
Name: Position: Relationship:			
Declaration:			
I hereby apply for employment with The VISION Academy Learning Trust. To the best of my knowledge all the particulars I have given are true. I understand that the deliberate provision of false information may disqualify me from employment or render me liable to instant dismissal if coming to light after my employment. I also understand that canvassing of Elected Members, senior officers of The VISION Academy Learning Trust, a member of the Senior Leadership Team Members or employees of the school, whether done directly or indirectly, will result in this application being disqualified.			
Name: Date:			

Recruitment Equality Monitoring Form

You may choose to complete this form. Should you wish to complete this, please return it with your completed application form.

THIS PAGE WILL BE REMOVED PRIOR TO THE SELECTION PROCESS

Gender:	☐ Male ☐ Female ☐ Do not wish to disclose		
	Has your gender identity changed from the gender you were assigned at birth?		
	Yes No Prefer not to say		
Date of Birth:	Age:		
Marital Status:	Please select the option which best describes your marital status.		
	Single Civil Partnership		
	Divorced Separated Widowed		
	Do not wish to disclose		
Race & Ethnic	Please show which group best describes your race and ethnic origin by ticking one of the boxes		
Origin:	below.		
	White: British Asian or Asian British: Chinese		
	White: Irish Asian or Asian British: Indian		
	White: Gypsy or Irish Traveller Asian or Asian British: Pakistani		
	White: Other Asian or Asian British: Bangladeshi		
	Mixed: White & Black Caribbean Asian or Asian British: Other		
	Mixed: White & Black African Black or Black British: Caribbean		
	Mixed: White Asian Black or Black British: African		
	Mixed: Other Black or Black British: Other		
	☐ Do not wish to disclose ☐ Other ethnic group		
Religion:	Please show which option best describes your religion by ticking one of the boxes below.		
	Christian Budhist		
	Hindu Jewish		
	Muslim Sikh		
	Do not wish to disclose No religion		
Disability:	Do you consider yourself to be disabled within the meaning of the Equality Act 2010?		
,	Yes No Do not wish to disclose		
Sexual Orientation	Bisexual		
(Please mark one	Heterosexual/Straight		
box only)	Gay/Lesbian		
	Prefer not to say		
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Candidates Guide for Completion of the Application Form and Equality Monitoring Form

Please read the following before completing your application form

General

Your application will be assessed against the criteria listed on the person specification.

- We do not accept CVs as part of your application; you must complete the application form
- Make sure all sections are completed clearly and as fully as possible.
- Make sure your application relates to the person specification.
- If you run out of space you may use additional pages unless stipulated elsewhere
- If possible please type your application form. If your application is handwritten please ensure that it is completed in black ink and is legible, otherwise it may have to be disregarded.
- Please ensure that you provide details of your email address on the application form as the majority of communication from the Trust will be via email for reasons of speed and economy.
- Make sure your application form is returned by the closing date.
- Keep a copy of your application; it will be useful to refer to for preparation if you are called for interview.

If you have a disability that prevents you from completing the application form please contact the school in the first instance.

Current legislation means that you will be required to provide documentary evidence for example National Insurance Number; showing that you are entitled to work in the United Kingdom. If you are short listed you will be asked to provide this at your interview.

Education/Education Courses

In providing this detail applicants must be prepared to produce evidence of qualifications that are essential to the post.

Any Education courses that are listed should be relevant to the position.

Previous Posts

Please state in chronological order all of your previous jobs/teaching positions the dates, post and salary details and the name of your current or last employer/school.

In the other experience section please account for all time since you left school, college or university. List your jobs with the most recent first, stating month and year and mentioning any gaps in employment. Include voluntary work particularly if you have not been in paid work

Relationships and References

Please complete these sections fully and clearly. This is important contact information.

We need to know if you are related to anyone within the school, a member of The VISION Academy Learning Trust. This is to ensure that you are neither disadvantaged nor favoured in your application. You must not canvass any member of this school, or the VISION Academy Learning Trust employee to gain employment. This will disqualify your application.

Referees must be able to produce information about your suitability for the post. References provided by relatives, friends or people with whom you live are not acceptable.

You will need to provide the names of two referees. One referee must be your current or most recent employer. The second referee should be a previous employer or someone who can give information about you that is relevant to the job. If you are a school or college leaver please give the name of your head teacher or tutor. Alternatively if you have had other part time work the person you worked for may be prepared to act as referee.

It is advisable to contact your referees at an early stage to let them know that you wish to give their name and ensure that they are willing to act as a referee.

If you are short listed, contact will be made with the referees you supply on the application form. If, however, you prefer that we should not contact a referee prior to interview, please say so on the application form.

Please note that an offer of appointment is conditional upon receipt of a least two satisfactory references

Return of Applications

Please ensure that your completed application form is submitted by 8 am on the closing date ideally to <u>vacancies@valt.org.uk</u> <u>or</u> by post to the following address:

Trust HR Officer Vision Academy Learning Trust C/o Egglescliffe School Urlay Nook Road Eaglescliffe Stockton-on-Tees TS16 0LA

If you are not called for interview within 30 days of the closing date please assume that you have been unsuccessful in your application.

Late applications will not normally be considered.