



St Edward's
School

Unity - Achievement - Faith

EMPLOYMENT APPLICATION FORM
SUPPORT STAFF

St Edward's School, Dale Valley Road, Poole, BH15 3HY
Tel. 01202 740950 HR@st-edwards.poole.sch.uk
www.st-edwards.poole.sch.uk

VACANCY DETAILS	
Position applied for	Click or tap here to enter text.
Where did you hear about this vacancy?	*Recruitment site <input type="checkbox"/> BCP <input type="checkbox"/> Internal <input type="checkbox"/> *Social media <input type="checkbox"/> Via friend <input type="checkbox"/> School Website <input type="checkbox"/> *Other <input type="checkbox"/> *Please state where:
PERSONAL DETAILS	
Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other:
Surname	
Previous Surname	
Forenames	
Preferred Forename	
Address	
Postcode	

CONTACT DETAILS		
Email address		
Telephone	Home	
	Work	
	Mobile	

ELIGIBILITY TO WORK IN THE UK	
National Insurance No.	
Do you have the right to work in the UK?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If you are not a British National or the holder of an EU or EEA passport, please indicate in what capacity you are residing in the UK	

CURRENT/MOST RECENT EMPLOYMENT	
Employer's Name	
Employer's Address Postcode	

Position Held			
Current Salary	£		
Grade	Grade		Spinal Column Point
Date Appointed	Click or tap to enter a date.		
Notice Period			
Reason for Leaving			
Can we contact you at work?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Main duties	Click or tap here to enter text.		

SUPPORTING STATEMENT

The information you provide in this section will be used in assessing your application and will determine whether you are shortlisted for interview. Please use this space to state how your skills, experience and training enable you to meet the requirements for the role for which you are applying for. Please refer to the criteria outlined in the person specification and respond in the order that each criteria point appears.

Click or tap here to enter text.

PREVIOUS EMPLOYMENT HISTORY (MOST RECENT FIRST) - <i>*Please explain any gaps in your employment history.</i>			
Employer's Name		Position Held	
Employment commenced	Click or tap to enter a date.	Employment end date	Click or tap to enter a date.
Full or Part-Time	Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/>	Reason for Leaving	
Responsibilities			

Employer's Name		Position Held	
Employment commenced	Click or tap to enter a date.	Employment end date	Click or tap to enter a date.
Full or Part-Time	Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/>	Reason for Leaving	
Responsibilities			

Employer's Name		Position Held	
Employment commenced	Click or tap to enter a date.	Employment end date	Click or tap to enter a date.
Full or Part-Time	Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/>	Reason for Leaving	
Responsibilities			
Reason for leaving			

Employer's Name		Position Held	
Employment commenced	Click or tap to enter a date.	Employment end date	Click or tap to enter a date.
Full or Part-Time	Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/>	Reason for Leaving	
Responsibilities			

Please tick here if continuing on a separate sheet

* GAPS IN EMPLOYMENT HISTORY: <i>Please detail below any periods of time when you have not been employed since leaving secondary education.</i>		
Date From (Month/Year)	Date to (Month/Year)	Reason

Please tick here if continuing on a separate sheet

REFERENCES

Referees named below must be your current (most recent) and previous employer. If you have not previously been employed, or are returning to work after a substantial career break and are unable to provide previous employment references, please provide alternatives, e.g. the name of your course Tutor/Headteacher or a suitable professional. It is our policy to contact referees prior to interview. If you do not wish us to contact the referee prior to interview please enter 'X' in the box applicable below.

Current (Most Recent) Employer	I do not wish you to contact this referee prior to interview <input type="checkbox"/>
Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other:
First Name	
Surname	
Organisation	
Address	
Telephone Number	
Email address	

Previous Employer	I do not wish you to contact this referee prior to interview <input type="checkbox"/>
Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other:
First Name	
Surname	
Organisation	
Address	
Telephone Number	
Email address	

EDUCATION, QUALIFICATIONS AND PROFESSIONAL MEMBERSHIPS

Please note, if shortlisted for interview you will be required to provide proof of your qualifications and memberships.

Qualifications, Short Courses and Teacher Training

Date	School/College/University/Awarding Body	Qualifications Achieved

All forms of canvassing will automatically disqualify candidates from appointment e.g. you must not ask a School Governor or an employee of St Edward's School to use their influence to help you get a job.

If selected for interview, you must, at that stage, make known any personal or business relationship which may conflict with the role applied for.

Are you related to a School Governor or employee of St Edward's School? Yes No

If 'yes', please provide

Name:

Relationship:

If selected for interview would you prefer to be contacted by:

Phone

Email

DATA PROTECTION LEGISLATION

The information you have provided will be held in compliance with the Data Protection Regulations 2018. If you have previous Local Government service or other service which counts as continuous, St Edwards School will seek confirmation from your last Authority of your date of employment for continuous service purposes in the event of you being offered the post. The School will also seek details of the number of day's sickness absence (not reasons) in the last 12 months for the purposes of administering the Local Government Sick Pay Scheme. You are deemed to have given your consent by signing this application form.

DECLARATION

I declare that the information I have provided on this application form is full, accurate and complete. I understand that if I provide false information or fail to provide full complete and accurate information, this may lead to the decision that

my application cannot be considered any further, the withdrawal of the offer of employment or, to my dismissal, if I have been appointed. Any offer of employment is subject to receipt of satisfactory references, medical assessment and Disclosure Barring Service checks, where applicable.

Signature:

Date:

EQUAL OPPORTUNITIES

St Edward's School will seek to ensure that all existing and potential employees are given equal opportunities. We are committed to the elimination of unlawful or unfair discrimination and will seek to ensure that no applicant for employment is disadvantaged by conditions or requirements which cannot be justified. In order to help the School, monitor the effectiveness of its Equal Opportunities Policy you are asked to provide the information requested below. This information is confidential and does not form part of your application. This slip will be detached from your application form upon receipt and the information will not be taken into account when shortlisting or making the appointment. If you are successful at interview and take up employment with the School, the equal opportunities information you have provided will form part of your employment record and will be held and maintained in accordance with the Data Protection Act 1998.

Name	
Date of Birth	Click or tap to enter a date.
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>
Position Applied for	
School	St Edward's School

Disability – For more information, please contact the Equality and Human Rights Commission Helpline on 0808 800 0082

Do you consider yourself to have a disability under the Equality Act 2010? A disability is defined as a 'physical or mental impairment which has substantial and long term adverse effects on the ability to carry out normal day to day activities.'	Yes <input type="checkbox"/>
	No <input type="checkbox"/>
	Prefer not to say <input type="checkbox"/>

Nationality	
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Ethnic Origin	White	British	<input type="checkbox"/>
		Irish	<input type="checkbox"/>
	Mixed	White and Black Caribbean	<input type="checkbox"/>
		White and Black African	<input type="checkbox"/>
		White and Asian	<input type="checkbox"/>
		Any other Mixed background	<input type="checkbox"/>
	Asian or Asian British	Indian	<input type="checkbox"/>
		Pakistani	<input type="checkbox"/>
		Bangladeshi	<input type="checkbox"/>
		Any other Asian background	<input type="checkbox"/>

	Black or Black British	Caribbean African Any other Black background	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	Other Ethnic Group	Chinese Any other Ethnic group	<input type="checkbox"/> <input type="checkbox"/>

Sexual Orientation	Heterosexual	<input type="checkbox"/>
	Bisexual	<input type="checkbox"/>
	Gay/Lesbian	<input type="checkbox"/>
	Prefer not to say	<input type="checkbox"/>

Religion and Belief			
Church of England	<input type="checkbox"/>	Catholic	<input type="checkbox"/>
		Other	<input type="checkbox"/>

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