

Maypole School Employment Application Form

Please refer to the school's website for a copy of our Child Protection & Safeguarding Policy and our Employment of Ex-Offenders Policy.

DATA PROTECTION NOTICE

Throughout this form we ask for some personal data about you. We'll only use this data in line with data protection legislation and process your data for one or more of the following reasons permitted in law:

- You have given us your consent
- We must process it to comply with our legal obligations

You'll find more information on how we use your personal data in our privacy notice which can be found on the school's website.

PLEASE ENSURE THAT YOU COMPLETE ALL GREEN SECTIONS OF THE APPLICATION FORM

VACANCY INFORMATION
Application for the post of:
School site (tick as applicable): Sunbury on Thames Streatham
Job ID/reference number:
What date are you available to begin a new post?
Are you able to work full time?
Yes.
No.
Where did you first hear about this job?

DISCLOSURE AND BARRING AND RECRUITMENT CHECKS

Maypole School is legally obligated to process an enhanced Disclosure and Barring Service (DBS) check before making appointments to relevant posts.

The DBS check will reveal both spent and unspent convictions, cautions, reprimands and final warnings, and any other information held by local police that is considered relevant to the role. Any information that is "protected" under the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 will not appear on a DBS certificate.

For posts in regulated activity, the DBS check will include a barred list check.

It is an offence to seek employment in regulated activity if you are on a barred list.

We'll use the DBS check to ensure we comply with the Childcare Disqualification Regulations. It is an offence to provide or manage childcare covered by these regulations if you are disqualified.

	data processed as part of the DBS check will be processed in accordance with data protection regulation the Maypole School privacy notice.
Do y	you have a DBS certificate?
	Yes
	No Date of check:
Are	you on the update service?
	Yes No
Any	job offer will be conditional on the satisfactory completion of the necessary pre-employment checks.
	y applicants who have been shortlisted will be asked for a self-declaration of their criminal record or rmation that would make them unsuitable for the position.
Any	convictions that are self-disclosed or listed on a DBS check will be considered on a case-by-case basis.
TIM	E SPENT LIVING AND/OR WORKING OVERSEAS
ched addi	bu have lived or worked outside of the UK in the last 5 years Maypole School must make any further cks it considers appropriate (in addition to the usual pre-employment checks). This may require itional information in order to comply with 'safer recruitment' requirements. If you answer 'yes' to the stion below, we may contact you for additional information in due course.
We'	Il base the decision on whether this is necessary on individual circumstances, and factors such as:
•	The amount of information you disclose in the DBS check
•	The length of time you have spent in or out of the UK
Have	e you lived or worked outside of the UK in the last 5 years?:
	Yes
	No
	s, please give details, including countries and relevant dates:
	➤ Country: date from: date to:
RIGI	HT TO WORK IN THE UK
	pole School will require you to provide evidence of your right to work in the UK in accordance with the higration, Asylum and Nationality Act 2006.
By s	igning this application, you agree to provide such evidence when requested.
SIGN	N AND DATE
Nam	ne (please print):
Sign	

Date:			

Instructions

Please complete all sections of this form using black ink or type.

The sections of this application form that include your personal details and equalities monitoring information will be detached prior to shortlisting. This is to ensure that your application is dealt with objectively.

Candidate Instructions are in green and you must complete the green shaded shaded boxes.

Your application will only be accepted if this form is completed in full.

Where possible, please complete this application form electronically and return to us via email, to ebarnes@maypoleschool.co.uk

PERSONAL DETAILS	
First name	
Preferred name, if different to above	
Surname	
Preferred title	
Previous surnames	
National Insurance number	
CONTACT DETAILS	
Address	
Postcode	
Home phone	
Mobile phone	
Email address	

DISABILITY AND ACCESSIBILITY

Maypole School has committed to ensuring that applicants with disabilities or impairments receive equal opportunities and treatment.

If you have a disability or impairment, and would like us to make adjustments or arrangements to assist if you are called for an interview, please state the arrangements you require:								
>								
RIGHT TO WORK IN THE UK								
Do you have the right to work in th	e UK?							
Yes								
No								
If yes, please state on what basis:								
UK citizen								
EU settled status								
Skilled worker visa								
Graduate visa								
Youth mobility visa								
Other – please provide full	Other – please provide full details in the box below							
RELATIONSHIP TO THE SCHOOL								
Please list any personal relationship school community:	ps that exist between you and any of	the following members of the						
Governing Body members								
• Staff								
Pupils								
	Pupil parents							
If you have a relationship with a governor or employee, this does not necessarily prevent them from acting as a referee for you.								
Name	Relationship	Role at the school						

CURRENT EMPLOYMENT DETAILS

Job title	Employer details (name, address, email and phone no)	Date employed From:	Date employed to:	Age range taught	No. on roll	Permanent or temporary	Part-time or full-time	Salary (inc. allowances)	Description of responsibilities

PREVIOUS EMPLOYMENT

Please provide details of **all** previous employment since leaving school, including education and voluntary work. Include any gaps in employment and the reasons for them, in the section below. List the most recent employment first.

Job title	Name and address of employer	Dates employed From	Dates employed to	Description of responsibilities	Reason for leaving

EMPLOYMENT GAPS

Please provide details of any employment gaps since leaving school, and give the reasons for the gap.

Start date	End date	Reason for employment gap

EDUCATION AND QUALIFICATIONS

Please provide details of your education from secondary school onwards.

You'll be required to produce evidence of qualifications.

Dates attended (month and year)	Name and location of school/college/university	Qualifications gained (including grades, awarding body and date of award)

TRAINING AND PROFESSIONAL DEVELOPMENT

Please give details of training or professional development courses undertaken in the last 3 years that are relevant to your application

Course dates	Length of course	Course title	Qualification obtained	Course provider

TEACHER STATUS - QUALIFIED TEACHERS ONLY

Teacher reference number	
Do you have QTS?	
QTS certificate number (where applicable)	
Date of qualification	
Are you subject to a teacher prohibition order, or an interim prohibition order, issued by the secretary of state, as a result of misconduct?	
Are you subject to a General Teaching Council sanction or restriction?	

ADDITIONAL INFORMATION

Please provide any additional information relevant to this application. You may wish to discuss additional skills or relevant special interests.

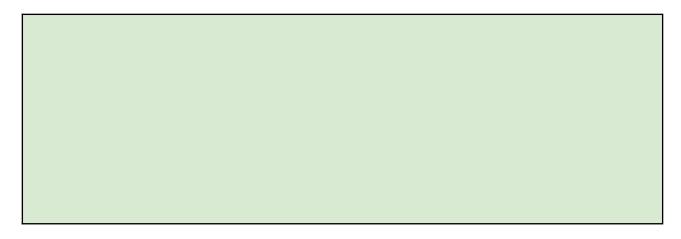
DRIVING LICENCE DETAILS

Do you have a valid driving licence?

Would you be willing to use your car to drive pupils to and from activities?

Statement of application

Please include below a statement explaining why you're applying for this post and how your experience, training and personal qualities match the requirements of the role as set out in the job description and person specification.



References

Please give the names of 2 people who are able to comment on your suitability for this post. **One must be your current or last employer.** If you have not previously been employed, please provide details of another suitable referee.

Maypole School reserves the right to seek any additional references we deem appropriate.

Please let your referees know that you've listed them as a referee, and to expect a request for a reference should you be shortlisted.

NAME	RELATIONSHIP TO YOU	ADDRESS AND POST CODE	CONTACT NUMBER	EMAIL ADDRESS	IS THIS YOUR CURRENT EMPLOYER?

If either of your referees knows you by a different name, please state what this is:

Equalities monitoring

We're bound by the Public Sector Equality Duty to promote equality for everyone. To assess whether we're meeting this duty, whether our policies are effective and whether we're complying with relevant legislation, we need to know the information requested below.

This information will not be used during the selection process. It will be used for monitoring purposes only.

EQUALITIES MONITORING INFORM	MATION								
What is your date of birth?		D	D	M	M	Y	Y	Y	Y
What is your sex?		Male Female							
What gender are you?		Male Female Other Prefer not to say							
Do you identify as the gender you were assigned at birth?			Yes No Prefer not to say						
Hov	v would you descr	ibe you	ır ethni	ic origi	n?				
White British Irish Gypsy or Irish Traveller Any other White background Asian or British Asian Bangladeshi Indian Pakistani Chinese	African Caribbea Any other background Mixed White an White an Any other background	an er Black und nd Asia nd Blac d Black r mixed	n k Africa	n	Other E	Arab Any ot	-	nnic gro	oup

Which of the	following best descri	ribes your sexual orientation?				
Bisexual		Other				
Heterosexual/straight		Prefer not to say				
Homosexual						
	What is your religi	ion or belief?				
Agnostic	Jain	Other				
Atheist	Jewish	Pagan				
Buddhist	Muslim	Sikh				
Christian	No religion	Prefer not to say				
Hindu						
	Pregnancy and	maternity				
Are you pregnant?	H	Have you given birth within the last 12 months?	1			
Yes		Yes				
No		No				
Prefer not to say		Prefer not to say				
		cause of a health problem or disability which h	has			
lasted,	or is expected to las	st, at least 12 months?				
Yes						
No						
Prefer not to say						
		state the type of impairment. Please tick all th ies applies, please mark 'other'.	at			
Physical impairment						
Sensory impairment						
Learning disability/difficulty	/					
Long-standing illness						
Mental health condition						
Developmental condition						
Other						

Please email this completed form to:

Emily Barnes at: ebarnes@maypoleschool.co.uk