

APPLICATION FORM

CONFIDENTIAL The accompanying guidance notes provide advice on how to fill in this form.	Please return to:		
Please type or write clearly using black ink.			
Post applied for:	Closing date:		
1. Personal details			
Title: (Mr, Mrs, Miss, Ms, Other)	Last name:		
First name(s):	Known as:		
Address:	Post code:		
Address:	How would you like us Email: Post: to contact you?		
*Preferred telephone no.	Mobile phone no.		
*National Insurance no.	*Email address: (please print clearly)		
Are you eligible to work in the UK	Yes: No:		
Do you need a work permit or sponsorship certificate work	in the UK? Yes: No:		
Do you require further leave to remain?	Yes: No:		
If yes, please clarify your status			
Above section must be completed (If your application is successful you will be asked to provid commence employment.)	le documentary evidence of your entitlement to work in the UK <u>before</u> you		
(TEACHERS ONLY)			
Do you hold Qualified Teacher Status (QTS)? Yes No	If yes, please give QTS Certificate number (if applicable)		
Have you successfully completed a period of induction as a qu	alified teacher in the country where the DFE require this? Yes: No:		
If yes please give date of completion:	re you registered with the General Teaching Council: Yes: No:		
If Yes, please give your Teacher Reference number (TRN) (DR	FE Number i.e. 12/34567)		
Are you subject to any conditions/prohibitions placed on you by If yes, please give full details:	y the TRA or another TRA in the United Kingdom? Yes NO		
0 D			
2. Present or most recent empl (Please start with your most recent/current employment. If yo			
Name of Employer/ School LEA			
Type of School			
Address:			
Post code:	Telephone no:		

Position held :								
Date started:		Unt	il:		Leaving date or notice required:			
Salary:		Gra poi	nde/Spinal nt:		TLR(s)		R&R	
Agency	Permanent	Temp	FTC	Supply	Full/time	Part/time		
Brief Description of D	uties:							
Reason for leaving if I longer employed:	no							
Starting with your requested. It is in benefits from, and	most recent j mportant that y d if you have b	oyment/Te job, paid and /or u you include period been self employe lates and number of	npaid, please s of unemploy d you will need	list previous ment: detai d to provide	s employment iling which office	ce you may	have receive	ed
Employers /Schoschool' (e.g. LEA,	ool 'type of	Position held &		Dat	es from/to mm/yy	Salary	Reason leaving	for
PLEASE PROVII	DE DETAILS	OF ANY GAPS IN	I YOUR EMPL	OYMENT	HISTORY – W	/ITH DATES	5.	
Please state the	name(s) of t	ning and Q he Secondary Sc JPGCE diplomas	hool, College	and Unive			es / qualific	ations
From/To		e of establishme		Examina	tion results S	ubject, level,	, grade	
		alifications professional qu				ssional inst	titutes that	you
hold. Name of profess	-		Membership				btained	

5. Training Courses attende	ed if relevant	
Please give details of any training that you h		our application. Include any on the
job training as well as formal courses.	Courses offended	Data from to
Course title or description and provider	Courses attended	Date from - to
		-l d
Continue on additional sheets as necessary (ple	ease state number of sheets atta-	ched)
6. Statement in Support of A	Application	
Please use this space to tell us how you meet e		specification – you will find it useful to
refer to the Guidance Notes to help you comple	ete this part of the form. We need	I to have this information in order to
consider your application.	•	
If continued on additional sheets, please make	sure your name is on each sheet	and state the number attached
here	•	

7. Referees

Please give details of two employers who can provide us with a reference, one of whom must be your current or most recent employer. In the case of a first appointment, one referee should be from your school or college. You should only give personal references if employment references are not available.

If you are applying for headteacher position and are already a headteacher one referee should be from the Local Authority or Diocese and the other from your current chair of governors.

If you are a school / college leaver give the details of your Headteacher or Tutor or the manager of a voluntary group for whom you have worked.

Please note: - that it is our policy to request references prior to interviews for short listed candidates only.

Referee's name:	Referee's position:
Address:	Post Code:
Email address:	Telephone number:
Referee's	Referee's position:
name:	
Address:	Post Code:
Email address:	Telephone number:
Miscellaneous	
Canvassing of employees or councillors directly or indirectly will dis	
Are you related to, or have a close personal relationship with, any C Yes: No: If YES, please state their name and the	
Name: Position	· · · · · · · · · · · · · · · · · · ·
Name: Position	
External Applicants Have you ever worked for Haringey Council or a Haringey School?	Yes: No:
If yes, please give dates From: To:	Yes: No:
Position held:	Line Manager:
Job Title on leaving:	
Reason for leaving:	
Name of School/ Directorate:	
8. Declaration	
This post is exempt from the Rehabilitation of Offenders Act 1974. (offence, date and sentence). In the event of a successful application	If you have been convicted of a criminal offence, please give details on, you will be required to apply for an enhanced DBS disclosure.
If you are applying for this post, you are not entitled to withhold info considered to be "spent". Please answer Q1 and Q2.	rmation even if you have convictions, which would normally be
	those spent could result in withdrawal of any job offer, dismissal or etails to the panel if selected for interview. Possession of a conviction ach case is considered on its merits.
Q1. Have you ever been convicted of any Yes: Criminal offences?	No: Please provide details on the enclosed Declaration Form.
Q2. Have you ever been disqualified from Yes: working with children or vulnerable adults?	Please provide details on the enclosed Declaration Form
The Equalities Act (2010)	
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The act defines a disabled person as "a person who has or I substantial long term adverse effect on their ability to carry o	has had in the past a physical or mental impairment which has ut normal day-to-day activities".
Under this definition do you consider yourself to be disabled?	? *
<u>Data Protection</u>	
	your application for employment and, if your application is successful, 118 basis for processing is that the processing is necessary for the
	with you. If you do not provide the information required, we will not be
	ets out full details of why and how we use personal information. You urate information corrected. Please see the School's privacy notice for I.

I confirm that the information provided on this application form is correct and understand that any misrepresentation or omission may

render me liable to summary dismissal if engaged.			
I understand that you will deal with all the information in line with the data protection legislation.			
I Agree to all the terms and conditions above			
Signed:	Date:		
Please return this form latest by the closing date shown in the adve	rtisement, to the address or e-mail address given on the		
advertisement.			