Employment Application Form v6.0

Chatsworth Schools is committed to safeguarding and promoting the welfare of children and expects all staff to share this commitment. Employment at the school is subject to satisfactory pre-employment checks including: Enhanced Disclosure and Barring System Checks, Overseas checks where necessary; prohibition checks; identity; eligibility to work in the UK; qualifications; health clearance and references.

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| Position applied for |  |
| When completed, please return this form to: | HR@bmprep.co.uk |

1. Personal Details

|  |  |
| --- | --- |
| Title |  |
| Surname |  |
| Name |  |
| Previous Names |  |
| Address |  |
| Telephone | Home |  | Mobile |  |
| Email Address |  |
| National Insurance Number |  |
| Please give details of any pension scheme to which you belong. |  |

1. Present or Most Recent Employer

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| --- |
| Please give details of your present or most recent employment |
| Job Title |  |
| Start Date |   | End Date |  |
| Notice Required |  |
| Current Salary |  |
| Allowance or other bonuses |  |
| Current Hours |  |
| Employer’s Name |  |
| Employer’s Address |  |
| Employer’s email address |  |
| Telephone Number |  |
| Brief Description of Current Duties and Responsibilities |  |
| Reason for Leaving |  |

1. Employment History

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| Please list below your employment history starting with the most recent. Include details of voluntary work and employment on a temporary contract or via an employment agency. Please continue on a separate sheet if necessary. Any periods of non-employment, including periods spent abroad must also be recorded in the section below.YOU MUST ACCOUNT FOR ALL YOUR TIME SINCE LEAVING FULL TIME EDUCATION |

|  |  |  |  |
| --- | --- | --- | --- |
| Position Held |   | Grade and Salary |  |
| Employer’s Name |  |
| Address |  |
| Date Started |   | Date Ended |  |
| Brief Description of Key Duties |  |
| Reason for Leaving |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Position Held |   | Grade and Salary |  |
| Employer’s Name |  |
| Address |  |
| Date Started |   | Date Ended |  |
| Brief Description of Key Duties |  |
| Reason for Leaving |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Position Held |   | Grade and Salary |  |
| Employer’s Name |  |
| Address |  |
| Date Started |   | Date Ended |  |
| Brief Description of Key Duties |  |
| Reason for Leaving |  |

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| --- | --- | --- | --- |
| Position Held |   | Grade and Salary |  |
| Employer’s Name |  |
| Address |  |
| Date Started |   | Date Ended |  |
| Brief Description of Key Duties |  |
| Reason for Leaving |  |

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| Periods of Non-Employment |
| Please indicate nature / reasons for any periods of non-employment, including any time spent abroad, with dates (dd/mm/yy) |
|  |

1. Membership of Professional Bodies / Professional Qualifications

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| --- | --- | --- | --- |
| Name of Body | **Qualification Class / Grade of Membership** | **Examination Leading to Membership** | **Date Obtained** |
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1. Education , Training and Qualifications

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| Starting with the **most recent** please give details of educational qualifications you have obtained.Candidates will be required to bring original certificates of qualification listed to interview. |

HIGHER EDUCATION

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| --- | --- | --- | --- |
| Name of Higher Education University / College | **Qualification** | **Date Taken****(to be taken)** | **Grades** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

FURTHER EDUCATION

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Higher Education College / School | Qualifications and Dates | Subjects | Grades |
|  |  |  |  |
|  |  |  |  |
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ANY OTHER RELEVANT QUALIFICATIONS OR TRAINING

|  |  |  |  |
| --- | --- | --- | --- |
| School / College | Qualifications and Dates | Subjects | Grades |
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1. Disability

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| Please outline any reasonable adjustments that could be made to assist you during the selection process. For example, if invited for interview would you need any particular arrangements? |

1. Pre-Employment Health Declaration

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| **I understand that all offers of employment are subject to a satisfactory pre-employment health declaration:**I confirm that I am mentally and physically fit to undertake the role for which I am applying, as described in the job specification, which I have read and understand.Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Any false statement may affect any employment or lead to disciplinary action.****Chatsworth Schools will use this information only for the purposes of pre-employment assessment.** |
| **I understand that all offers of employment are subject to satisfactory health reference requests to present and/or previous employers which could include the following questions:**The number of days you have been absent from work due to sickness in the past twelve months.The number of episodes of absence this represents.Your usual level of sickness absence.If your attendance and/or absence has led to the initiation of any relevant procedures.Do you consent to us asking for this information? *(please tick)* YES NO**Chatsworth Schools has a policy for managing sickness absence. However, it recognises that some (but by no means all) disabled job applicants may suffer disability related absence and, as such, ‘reasonable adjustments’ may need to be considered. A further assessment may take place after confirmation of appointment, to determine what reasonable adjustments may need to be considered.** |

1. Referees

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| Please provide details of two referees, one of whom must be your present or most recent employer and the other should be a previous employer. If you have not been in paid employment please give the name of the head of education or training establishment and/or the manager of a voluntary group of whom you have worked. If you are not currently working with children and worked with children in a previous post, one of your referees should be from a position in which you worked with children.May we contact your referees prior to interview? *(please tick)* YES NO |

|  |  |
| --- | --- |
| Name of Referee |  |
| Job Title |  |
| Address |  |
| Date of Employment / Study | From  | To |
| Relationship with Referee |  |
| Contact Number 1 |  | Contact Number 2 |  |
| Email Address |  |

|  |  |
| --- | --- |
| Name of Referee |  |
| Job Title |  |
| Address |  |
| Date of Employment / Study | From  | To |
| Relationship with Referee |  |
| Contact Number 1 |  | Contact Number 2 |  |
| Email Address |  |

1. Employment Restrictions

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| Are there any restrictions affecting your ability to take up employment in the UK? *(please tick)* YES NO |
| What is your current visa status? | Date of Expiry (dd/mm/yy) |
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| If you are offered this job, will you have any other paid work? *(please tick)* YES NO |
| If YES, please give the following details: |
| Employer(s) |  |
| Nature of Work |  |
| Number of hours per week |  | Working Times |  |
| Dates required to work |  |

 Rehabilitation of Offenders Act 1974

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| If you are invited for interview, you will be asked to disclose, prior to interview, whether you have any unspent conditional cautions or convictions under the Rehabilitation of Offenders Act 1974 and whether you have any adult cautions (simple or conditional) or spent convictions that are not protected as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2020. The amendments to the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (2013 and 2020) provides that when applying for certain jobs and activities, certain convictions and cautions are considered ‘protected’. This means that they do not need to be disclosed to employers and, if they are disclosed, employers cannot take them into account.Guidance about whether a conviction or caution should be disclosed can be found on the Ministry of Justice website. You may also wish to contact the charities Nacro or Unlock for impartial advice. **Nacro** - <https://www.nacro.org.uk/criminal-record-support-service/> or email helpline@nacro.org.uk or Phone 0300 123 1999 **Unlock** – <http://hub.unlock.org.uk/contact/> Phone 01634 247350 |
| A new Enhanced Level Disclosure and Barring Service (DBS) check of criminal records will normally be required for this post. Access to the application process will be provided. Subscription to the DBS Update Service may be a condition of employment.Other standard checks before your employment commences may include, as relevant, accessing lists of ‘Teachers and Others’ prohibited from the profession; Secretary of State directions; Induction and Probation Failures; and sanctions imposed by teacher regulation authorities overseas.  |

1. Data Protection Act 2018

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| HOW WE USE YOUR INFORMATIONWe will use the information which you have provided on this form, and which we collect from other sources (such as from references and from the Disclosure and Barring Services) for the following purposes: to assess your suitability for the role for which you have applied, to assess your suitability to work with children and to enable us to comply with our legal obligations (including safeguarding and promoting the welfare of children and young people). Should you be appointed to the role, we may also use the data regarding your degree and professional qualifications on staff lists on our website or in our marketing material.Further information on how the school/nursery uses personal data is set out in our Privacy Notice, which can be found on our website. |

1. Declaration

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| * I confirm that the information I have given on this application form is true and correct to the best of my knowledge.
* I confirm that I am not named on the Children's Barred List or otherwise disqualified from working with children.
* I understand that providing false information is an offence, which could result in my application being rejected, or (if the false information comes to light after my appointment) summary dismissal and may amount to a criminal offence.
* I consent to the school/nursery processing the information given on this form, including any 'sensitive' information, as may be necessary during the recruitment and selection process.
* I consent to the school/nursery making direct contact with the people specified as my referees to verify the reference.
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| Signed: |
| Date: |
| **Should any pre-employment checks prove to be unsatisfactory any contract of employment will be terminated.**Where this form is submitted electronically and without signature, electronic receipt of this form will be deemed equivalent to submission of a signed version and will constitute confirmation of the declaration above. |