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| **SUPPORT STAFF APPLICATION FORM** |

We are committed to attracting, retaining and developing a diverse and skilled workforce.

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| **VACANCY DETAILS** | |
| Job title: |  |
| School/Location: |  |

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| **PERSONAL DETAILS** | |
| Title: |  |
| Surname: |  |
| Forename(s): |  |
| Previous name(s): |  |
| Date of birth: |  |
| Address: |  |
| Postcode: |  |
| Contact number: |  |
| Email address: |  |
| National Insurance Number: |  |
| Qualified to work in the UK? |  |
| Applying as a job sharer? |  |

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| **OTHER APPLICANT DETAILS** | | |
| Are you related to a member of staff employed by Consilium Academies? | Yes  No | |
| If yes, please provide details: | Name: |  |
| Relationship to you: |  |
| Position: |  |
| Are you currently, or have you previously been employed by Consilium Academies? | Yes  No | |
| If yes, please provide details: | Date from: |  |
| Date to: |  |
| Reasons for leaving (if applicable): |  |

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| **PRESENT OR MOST RECENT EMPLOYMENT DETAILS** | |
| Name of employer: |  |
| Address: |  |
| Postcode: |  |
| Date of appointment: |  |
| Job title: |  |
| Salary/Wage: |  |
| Date of leaving (if applicable): |  |
| Reasons for leaving (if applicable): |  |
| Period of notice: |  |
| Brief summary of main duties: |  |

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| **ADDITIONAL EMPLOYMENT DETAILS** | |
| Do you have any employment which will continue if you are appointed? | Yes  No |
| If yes, please provide details: |  |

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| **PREVIOUS EMPLOYMENT DETAILS** | | | | |
| If there are any periods of time that have not been accounted for, for instance, periods of travel, unemployment or time taken out of paid employment due to caring responsibilities please give details of them here with dates. The information provided must provide a complete chronology since leaving full time education. | | | | |
| Name of employer | Job Title | Salary | Date from/to | Reasons for leaving |
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| **QUALIFICATIONS** | | |
| Please give details of qualifications that you have gained or are currently working towards, which are relevant to the job for which you are applying. | | |
| Date Obtained | School/College/University | Qualification/Result/Grade |
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| **TRAINING** | | |
| Please list any course(s) which you have attended which are relevant to the job for which you are applying. | | |
| Date(s) | Course Title | Brief Description |
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| **PROFESSIONAL MEMBERSHIP** | | |
| Date from/to | Type of Membership | Professional Body |
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| **SUPPORTING INFORMATION** |
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| **DISCLOSURE OF CRIMINAL BACKGROUND** | |
| Information requested under the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975.  Normally under the above act, some criminal convictions do not have to be disclosed after a period of time when they become ‘spent’. This does NOT apply to posts which are involved with vulnerable groups (e.g. children, elderly people etc). Due to the nature of the work for which you are applying, this post is made exempt from these rules by the above Order. This means that you MUST answer the following questions about current and ALL previous criminal convictions. Any information will be treated with the strictest confidence and will be considered only in relation to this application. Disclosure of a criminal record will not exclude you from the appointment unless the Trust considers that the conviction renders you unsuitable. Failure to disclose this information could lead to your application being rejected, or if you were appointed, to dismissal if it is subsequently learnt that you have a criminal conviction. If you are ultimately offered the position, we will carry out a DBS independent check. | |
| Have you ever been cautioned or convicted of any criminal offence? | Yes  No |
| If yes, please give details of the caution(s), conviction(s) and date(s): |  |
| Have you ever been charged with any offence which has not yet been brought to trial? | Yes  No |
| If yes, give details of the charge and the date of the hearing (if known): |  |
| I confirm that the information given above is correct and I understand that a failure to disclose any convictions may lead to my dismissal.  **Signed: Date:** | |

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| **EARLY OR ILL HEALTH RETIREMENT/VOLUNTARY REDUNDANCY** | |
| Have you been granted early or ill health retirement or taken voluntary redundancy from any other employer? | Yes  No |
| If yes, did you receive any enhancements? | Yes  No |
| If yes, please give the name of the employer: |  |

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| **DISABILITY** | |
| The Disability Discrimination Act defines a disabled person as someone with a physical or mental impairment which has a substantial and long term adverse effect on his or her ability to carry out normal day to day activities. | |
| Do you consider yourself to be disabled according to this definition? | Yes  No |
| Please specify any arrangements we can make to assist you if you are invited for interview/assessment: |  |

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| **REFERENCES** |
| Please provide the names and contact details of at least two referees who can comment on your suitability for this position. One should be your current or most recent employer. If you are not currently working with children but have done so in the past the second referee should be the employer by whom you were most recently employed in work with children. References will not be accepted from relatives, or person who only know you as a friend. |

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| **CURRENT OR MOST RECENT EMPLOYER** | |
| Referee name: |  |
| Job title: |  |
| Organisation: |  |
| Address: |  |
| Postcode: |  |
| Contact number: |  |
| Email address: |  |
| In what capacity did you know the referee? |  |
| Are you related to, or the partner of this referee? | Yes  No |
| Can this referee be contacted prior to interview? | Yes  No |

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| **SECOND REFERENCE** | |
| Referee name: |  |
| Job title: |  |
| Organisation: |  |
| Address: |  |
| Postcode: |  |
| Contact number: |  |
| Email address: |  |
| In what capacity did you know the referee? | Manager |
| Are you related to, or the partner of this referee? | Yes  No |
| Can this referee be contacted prior to interview? | Yes  No |

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| **MONITORING EQUALITY & DIVERSITY** |

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| **GENDER** | |
| Male  Female | |
| Is your gender identity the same as the gender you were assigned at birth? |  |

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| **ETHNIC ORIGIN** | | |
| **White** | British |  |
|  | Irish |  |
|  | Traveller of Irish Heritage |  |
|  | Gypsy/Roma |  |
|  | Polish |  |
|  | Other White European |  |
|  | Other White |  |
| **Mixed** | White and Black Caribbean |  |
|  | White and Black African |  |
|  | White and Indian |  |
|  | White and Pakistani |  |
|  | White and Bangladeshi |  |
|  | Other Mixed |  |
| **Asian and Asian British** | Indian |  |
|  | Pakistani |  |
|  | Bangladeshi |  |
|  | Kashmiri |  |
|  | Other Asian |  |
| **Black or Black British** | Caribbean |  |
|  | African |  |
|  | British |  |
|  | Somali |  |
|  | Other Black |  |
| **Chinese or Other** | Chinese |  |
|  | Other Ethnic Group |  |
|  | Unknown |  |

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| **RELIGION/BELIEF** | |
| Buddhist  Christian  Muslim  Other | Hindu  Jewish  Sikh  No Religion |

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| **SEXUAL ORIENTATION** | |
| Bisexual  Gay man  Gay woman/Lesbian | Heterosexual/Straight  Other  Prefer not to say |

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| **GDPR** |
| All information contained in this form will be treated as strictly confidential, when used for recruitment purposes only. However, the authority is under a duty to protect public funds it administers and to this end may use this information you have provided on this form within its authority for prevention and detection of fraud. It may also share this information with other bodies administering public funds for this purpose. Y supplying information, you will also be indicating your consent to the information being processed for all employment purposes as defined in the Data Protection Act 1998, and any verification checks which may be made. It will be copied for use during the recruitment process. Once the recruitment process is completed, the data will be stored for a maximum of six months then destroyed. If you are a successful candidate your application form will be used as part of your personnel record.  **Consilium Academies is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.** |

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| **DECLARATION** |
| I confirm that I am not subject to any immigration controls or restrictions, which prohibit my working in the UK.  I confirm that the information supplied by me in this application is complete and correct to the best of my knowledge.  I understand that any false information, any relevant omission or misleading statements may disqualify me from employment or result in my dismissal.  *Please note that a 6 month probationary period applied to all new entrants to the Trust regardless of previous service.*  **Signed: Date:** |