**Biddick Academy  
Job Application Form**

Applicant ref:

**Please read the Guidance Notes before completing this application form**

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| Position applied for: | | |
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| Title: | Surname: | |
| Forename(s) | Previous surname(s): | |
| Address:  Postcode: | National Insurance number: | |
| Date of birth: | |
| Home telephone:  Mobile:  Work: (optional) | |
| Email: |

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| **Data Protection** |
| Throughout this application form we have asked 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 for job applicants found in the Application Pack. |

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| **Disability and Accessibility** |
| The Academy is 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 below: |

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| **Right to Work in the UK** |
| The Academy will require you to provide evidence of your right to work in the UK in accordance with the Immigration, Asylum and Nationality Act 2006.  By signing this application, you agree to provide such evidence when requested. |

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| **Driving and Mobility** |
| Do you hold a current Driving Licence? ☐Yes ☐No  Do you hold a current HGV/PSV or other specialist Driving Licence? ☐Yes ☐No  Please specify: |

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| Please give details of any personal relationships that exist between you and any of the following: Trustees; Employees; Students. Please state below name(s) and the relationship. |
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| **Employment History** | |
| **Current employer:**  Job title:  Name and address of employer:  Grade/salary:  Permanent/temporary: | Date appointed:  Date of leaving: (if applicable):  Reason for leaving:  Full time/part time:  Notice required: |
| Brief details of duties and responsibilities in present position: | |

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| Please provide details of any employment (including voluntary/unpaid) that you wish to continue should you be successful in this application: |

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| **Previous Employment** (list all employment including unpaid and voluntary work, most recent first) | | | | | | | | |
| Job title | Employer name and address | Dates  (from and to) | | Salary/  grade | Permanent/  temporary | Full time/  part time | Age range/  number on roll | Reason for leaving |
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| **Gaps in Employment** (if you have any gaps in your employment, please give reasons below) |

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| **Education and Training** | | |
| Dates attended  (month and year) | Name and location of educational establishment | Qualifications gained (inc. level and grade) |
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| **Further Training and Professional Development** | |
| Details including course title, course provider and qualification obtained | Date |
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| **Teacher Status (to be completed for teaching posts)** | |
| Do you have Qualified Teacher Status? Please state Teacher Reference Number: |  |
| QTS Certificate Number (where applicable): |  |
| Please state subjects taught including subsidiary subjects: | Main:  Subsidiary: |
| 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? |  |

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| **References** | |
| Please give the name and contact details of **TWO** independent referees who will provide information regarding your suitability for this job. **ONE** of the referees must 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 to work with children. References will not be accepted from relatives or persons who only know you as a friend. The Academy reserves the right to seek references prior to interview and any additional references we deem appropriate. | |
| Name:  Position:  Address:  Postcode:  Telephone number:  Email address:  Relationship to applicant: | Name:  Position:  Address:  Postcode:  Telephone number:  Email address:  Relationship to applicant: |

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| **Personal Statement** |
| Please provide a detailed statement of how your experience, training and personal qualities match the requirements of the role as set out in the job description and person specification (maximum 1,500 words) |

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| **Declaration** | |
| I declare that the information on this application form is full, accurate and complete. I understand that if I provide false information or fail to provide full, accurate information, this may lead to the decision that my application cannot be considered any further, the withdrawal of any conditional offer of employment, or by my dismissal, without notice, if I have been appointed. Canvassing any appointing officer directly or indirectly for any appointment with the Academy is prohibited and shall, if deemed appropriate, disqualify the candidate for that appointment.  By signing this form I am agreeing to the above statement and certify that all the information I have given is true and complete. | |
| Signed: | Date: |
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| **Safeguarding Declaration** | |
| I declare that the information I have given on this form is complete and accurate and that:   * I am not barred or disqualified from working with vulnerable groups, children or young people * I am not subject to any sanctions or conditions on my employment imposed by the Disclosure and Barring Service, Secretary of State or other regulatory body. | |
| Signed: | Date: |

***Biddick Academy is committed to the safeguarding and promoting the welfare of children and young people and expect that all staff and volunteers to share this commitment. The successful candidate will be subject to an enhanced DBS check before taking up the post, along with pre-employment safeguarding checks. It is an offence to apply for a role if you are barred from engaging in regulated activities relevant to children.***

***We request that all applicants review our safeguarding and child protection policies on our website. https://biddickacademy.com/***

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| Strictly Private and Confidential  **Recruitment Monitoring Form** | |  | | --- | | Applicant Ref: | |

We are bound by the Public Sector Equality Duty and committed 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.

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| equalities monitoring information | | | | | | | | | | |
| **What is your date of birth?** | | **D** | **D** | **M** | | **M** | **Y** | **Y** | **Y** | **Y** |
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| **Are you?** | | ☐Male  ☐Female | | | | | | | | |
| **Please describe your ethnic origin?** | | | | | | | | | | |
| **White**  ☐British  ☐Irish  ☐Any other White background  **Asian or British Asian**  ☐Bangladeshi  ☐Indian  ☐Pakistani  ☐Chinese  ☐Any other Asian background  **Other ethnic group**  Please state: | **Black or Black British**  ☐African  ☐Caribbean  ☐Any other Black background  **Mixed**  ☐White and Asian  ☐White and Black African  ☐White and Black Caribbean  ☐Any other mixed background  **Prefer not to say**  ☐Prefer not to say | | | | **Arab or Middle Eastern**  ☐Arab  ☐North African  ☐Any other Arab or Middle Eastern background  **Travelling Community**  ☐Gypsy/Roma  ☐Traveller of Irish descent  ☐Other member of the travelling community | | | | | |
| **How do you describe your sexuality?** | | | | | | | | | | |
| ☐Bisexual  ☐Heterosexual/straight  ☐Gay man | | ☐Gay woman/lesbian  ☐Prefer not to say | | | | | | | | |
| **What is your religion or belief?** | | | | | | | | | | |
| ☐Agnostic  ☐Atheist  ☐Buddhist  ☐Christian  ☐Hindu | ☐Jain  ☐Jewish  ☐Muslim  ☐No religion | | | | ☐Other  ☐Pagan  ☐Sikh  ☐Prefer not to say | | | | | |
| **What is your relationship status?** | | | | | | | | | | |
| ☐Single ☐Prefer not to say  ☐Married/Civil Partnership | | | | | | | | | | |
| **Do you conider yourself to have a disability?**  **(This may include a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities. Long-standing means that it has lasted, or is likely to last, for over a year)** | | | | | | | | | | |
| ☐Yes ☐Prefer not to say  ☐No | | | | | | | | | | |
| **Please state where you saw the job advertisement:** | | | | | | | | | | |
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**Please ensure you return this form with your completed application form.**