

APPLICATION FORM

Position applie	ed for:				
Length of notice required:					
1. PERSONAL D	DETAILS				
First name(s):		Surnan	Surname:		
Title (eg Dr, Mı	r, Mrs, Miss, Ms):	Any pre	Any previous surnames:		
National Insura	ance no:	Curren	Current salary:		
Current addres	SS:				
Contact Tel Nu Daytime:		vening:	Mobile:		
Daytime: Evening: Mobile:					
Email address	:				
Dates you are	NOT available for	interview:			
		-			
	n d qualifications. ails of all qualificat	tions gained from NV	Q and or GCSE level in (chronological	
Dates From: To:	- Establishment	Subject/s	Qualifications gained	Attainment Level	
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Dat	es	Establishment	Subject/s	Qualifications gained	Attainment Level
From:	То:	Establishment			

Study and other professional qualifications:

Dat		- Establishment	Establishment Qualifications gained Subjects	Subjects	Attainment Level
From:	То:				

3.EMPLOYMENT AND QUALIFICATIONS

Please give all details in reverse order, starting with the **most recent first**:

Employment History

Da	tes	Name and address of	Job title, description of	Reason for
From:	То:	Employer	duties and responsibilities	leaving

F	ites	Name and address of	Job title, description of	Reason for
From:	То:	Employer	duties and responsibilities	leaving
riods no	t in emplo	yment:		
				So o o o o o o o o o
			nt or training since leaving S d continue on another shee	
rom:	To:		n employment or training:	•
EVDEDU	ENICE			
EXPERI	ENCE			
w woul	d your ex		the role you have applied	for? Identify
w woul	d your ex	perience help you with toerience that would suppo		for? Identify
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4. REFERENCES

Please give details below of two professional people who can provide information that will confirm your suitability for this post, one of whom should be your current or most recent employer or if this is your first job, your school teacher or higher or further education lecturer. Current or previous employers will be asked about disciplinary offences relating to children including penalties that are 'time expired' and any child protection concerns. The second referee should **not** be a relative or contemporary.

Details of First Referee

Name:	
Capacity known:	
Organisation:	
Telephone No:	
Email:	
Details of Second Ref	^f eree
Name:	
Capacity known:	
Organisation:	
Telephone No:	
Email:	

5. TERMS AND DECLARATIONS

DISABILITY DISCRIMINATION

Highfields School complies with the Disability Discrimination Act 1995. If you have any disability, or there is any medical or other reason why you might not at any stage be able to fulfil your duties, such as, for example, a previous major illness, you should give further details in the space below, or in a covering letter. The successful applicant will be required to complete a medical questionnaire and, if necessary, undergo a medical examination. If

please state any adjustments that you might need to overcome this restriction.
DECLARATION – CHILD PROTECTION
I am aware that the post for which I am applying is exempt from the Rehabilitation of Offenders Act 1974 and therefore all convictions, cautions and bind-overs, including those regarded as 'spent' must be declared. I understand that it is an offence to apply for the role if I am barred from engaging in
regulated activity relevant to children
I have not been disqualified from working with children, am not named on DfES List 99, ISA Barred Lists or the Protection of Children Act List; I am not subject to any sanctions imposed by a regulatory body (e.g. the General Teaching Council) and either :
*I have no convictions, cautions or bind-overs Or:
*I have attached details of any convictions, cautions or bind-overs in a sealed envelope marked 'Confidential' which I have sealed and which I understand will only be seen by the Headteacher in the event that I am selected for the post
(*Delete as applicable)
Signed Date
A copy of the school Child Protection and Safeguarding Policy is available on the school website.
DECLARATION
I declare that:
 All details provided by me as any part of this application are true and correct. I know of no reason why I should not be eligible for this post and am able to carry out
my duties if appointed.
 I understand that misleading statements may be sufficient grounds for cancelling any agreements made.
Signed Date
Please note that to meet our obligations under Data Protection Legislation all candidates accept that by signing their application form all or part of the information provided on this form may be used and

processed by Highfields School for recruitment and personnel administration and for equality monitoring. Such use will be subject to the provisions of the Data Protection Act 1998.