

Application Form

If you need a copy of this information in large print, Braille, another language or on cassette, please ask us.

| Application for the Post of: | Job No: |
|------------------------------|---------|
| Candidate Ref No. | |

The Staffordshire University Academies Trust and its Academies are committed to providing the highest level of education and care to their pupils, and to safeguarding and promoting the welfare of children and young people. Therefore, the Trust and its Academies strictly adhere to the Safer Recruitment Policy.

Prospective Applicants

All prospective applicants must complete the application form in full; CVs or general letters of application will not be accepted. As part of this application form, applicants will be asked to complete a criminal records self-disclosure.

Shortlisted Candidates

References will be sought on all shortlisted candidates and where possible will be obtained before interview so that any issues of concern they raise can be explored further with the referee, and discussed with the candidate at interview. Where it is not possible to obtain references prior to interview because of delay on the part of the referee a reference will be received and scrutinised prior to confirmation of appointment.

In all instances where an applicant currently works in a school or educational setting, a reference will always be sought from the Principal of that establishment. If a candidate for a position is not currently employed in a school, but has been in their past, we will check with the school, college or local authority at which they were most recently employed, to confirm details of their employment and their reasons for leaving. A minimum of two references will be received and scrutinised – one to be from the current or most recent employer.

Candidates attending interviews will always be required to;

- Explain any gaps in employment
- Explain any anomalies or discrepancies in the information available to the selection panel
- Declare any information that is likely to appear on a DBS disclosure
- Demonstrate their attitudes, motives and values for working with children and young people, and their capacity to safeguard and protect the welfare of children and young people

Successful Candidates

An offer of appointment to a successful candidate, including one who has lived or worked abroad, is conditional upon satisfactory completion of the following pre-employment checks. The appointment will:

- Verify a candidate's identity, following the DBS identity checking guidelines
 https://www.gov.uk/government/publications/dbs-identity-checking-guidelines/idchecking-guidelines-for-dbs-check-applications:
- Obtain a certificate for an enhanced DBS check with a barred list information where the person will be engaging in regulated activity;
- Obtain a separate barred list check if an individual will start work in regulated activity before the DBS certificate is available;
- Verify the candidate's mental and physical fitness to carry out their work responsibilities PEAQ or Assessment of Fitness to Work
- Conduct other checks related to the requirements of the role e.g. driving licence or valid insurance
- Verify the person's right to work in the UK or if a person has lived, or worked outside the UK make any further appropriate checks

Please note that in accordance with the Staffordshire University Academies Trust Safer Recruitment Policy, all offers of employment will be subject to the completion of the Trust's/Academy's pre-employment screening process. The position applied for is subject to appropriate vetting procedures including a criminal records check from the Disclosure and Barring Service (formerly CRB) which will require you to disclose details of all unspent and unfiltered spent reprimands, formal warnings, cautions and convictions in your application form.

| Last Name: First Name(s): Home Address: Please specify alternative correspondence address on a separate sheet. Postcode: E-mail address: National Insurance No (If you have one): Date of Birth: Do you have a full current driving licence? Do you have daily use of a yes No Work Telephone Number: Work Telephone Number: |
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| First Name(s): Home Address: Please specify alternative correspondence address on a separate sheet. Postcode: E-mail address: National Insurance No (If you have one): Date of Birth: Do you have a full current driving licence? Do you have daily use of a You No Work Telephone Work Telephone |
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| driving licence? Number: Number: Work Telephone |
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| Do you have any penalty points on your licence? Yes No Number: |
| If so, how many? |
| Do you consider yourself to have a disability? |
| (NB: The Disability Discrimination Act defines a person as having a disability if he/she "has 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") |
| The Academy operates an 'Interview Guarantee Scheme' for people with a disability and who meet the essential criteria of the post. |
| If you have a disability, are there any arrangements which we can make for you Yes No I |
| If yes, please outline your requirements: |
| How did you find out about this job? |
| Are you applying on a Job Share basis? Yes No |
| If so, please state the proportion of full-time you are willing to work: |
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| Present (or Most Recent) Employment | | | |
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| Employer's name, address and telephone number: | | | |
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| Date Started: Title of Post: | | | |
| Present or final grade/salary: | | | |
| Specify any additional benefits/payments you receive: | | | |
| Notice Required: Date of Leaving (if applicable): | | | |
| Reason for leaving (if applicable): | | | |
| Please provide a brief description of duties of the post (continue on a separate sheet if necessary): | | | |
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| Have you ever been subject to Disciplinary Proceedings? Yes No | | | |
| If yes, please indicate the outcome: | | | |
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Previous Employment

Beginning with the most recent, all periods since leaving full-time education should be accounted for e.g. unemployment, voluntary work, raising a family or any part-time work undertaken whilst in education. (Continue on a separate sheet if necessary).

| Job Title | Employer's Name, Address & Telephone Number | Date From | Date To | Salary | Duties and Achievements | Reason for Leaving |
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| School/College/University /Training Provider | Dates Attended | Subject(s) or Course/Training Event Title (including exams passed/still to be taken and grades where applicable). | Office use only Certificates check |
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| Name of Professional Association | Professional Qualifications/ Membership and Date Obtained | By Award or Examination | Office use only Certificates chec |
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| 7.03001411011 | Wembership and Date Obtained | Examination | Continuated one |
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| Additional Information Please give any details you wish in support of your application, in particular any experience, skills, knowledge, |
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| training and qualifications relevant to the post applied for as detailed in the information sent to you. (Please continue on a separate sheet if necessary). |
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| References | | | | |
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| School/University Acade employer. Please include | applicable to your present j mic Staff. Please state in v e name, address, telephone n lease ensure you include a He | what capacity the umber and e-ma | e two referees are a il address if known. If | cting, e.g. current you have recently |
| 1st Referee's Name and Address: | | | | |
| Telephone No: | | Capacity: | | |
| · | | Сарасну. | | |
| E-Mail Address: 2nd Referee's Name and Address: | | | | |
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| Telephone No: | | Capacity: | | |
| E-Mail Address: | | | | |
| | will be required to provide orige accompanying Guidance No | es please confirm | n that you are able to | |
| Self-Declaration of Crim | | es | No L | |
| This post involves workin Act 1974. We will check w | ing in an Academy and is exem with the Disclosure and Barrin Academies are 'Regulated Act | g Service (DBS) | to see if you have any | criminal |
| convictions. For informat | s of all unspent and unfiltered tion regarding filtering of convitous/publications/filtering-rules-for- | ctions please see | e: | utions and |
| | l be treated as confidential. Yo appointment. Failure to disclo | | | |
| Do you have any unspen offences? | t and unfiltered spent criminal | convictions, disq | ualifications, cautions | or driving |
| | Υ | es 🗌 | No 🗌 | |
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| Are you barred from working with children or subject to any sanctions imposed by a regulatory body (e.g. GTC/Teaching Agency)? |
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| Yes |
| If you have answered yes to either of the above questions, please provide dates and brief details here: |
| |
| The Academy is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults and expects all staff and volunteers to share this commitment. |
| The information given in this form will form part of The Contract of Employment for successful candidates. Data will be kept in accordance with the General Data Protection Regulation as of 25 th May 2018. |
| The data collected on this form will be stored in a secure and confidential manner. For the successful candidate, this form will be used for the purpose of human resource management and kept in your personnel file for the duration of your employment, up until the date of termination of employment, plus six years. For unsuccessful applicants, your application will be disposed of after 6 months of the date of appointment of the successful candidate. |
| Please refer to the Staffordshire University Academy Trust's Privacy Policy for the full details regarding the protection of personal data. |
| <u>Declarations</u> To your knowledge are you related to any member of staff of Governor of the Academy? |
| Yes No |
| If 'Yes', please state their name and position held: |
| I declare that all the information I have provided is true, that I have not canvassed a member/officer of the Academy, directly or indirectly, in connection with this application and further, that I will not do so. I understand that such canvassing will disqualify me as a candidate. I further understand that failure to disclose any relationship with a member/officer of the Academy or providing information which is untrue or omitting information relevant to the application, will also disqualify me and that if such failure/untrue information is discovered after appointment I may be liable to dismissal without notice. I agree that the information I give you in connection with this application for employment may be stored and processed for the purpose of personnel management. |
| Signed: |
| Date: |
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