



Internal use only

Ref . No. _____

Date Received _____

NORTHAMPTON SCHOOL *for Boys*

Billing Road, Northampton, NN1 5RT Telephone: (01604) 230240 Fax: (01604) 258659

Employment Application Form: Estate/Cleaning Staff

The Governing Body is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.

Please complete in BLACK ink and CAPITALS

Vacancy Job Title	
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Part 1. Information for shortlisting and interviewing

1. Initials _____ Surname or Family Name _____

2. Letter of Application: You may wish to enclose a letter of application with this form

3. Current/Last Employment

Name and address of employer	
Job title	
Date appointed to current post	
Current salary	
Date available to begin new job	

4. Previous Employment Please provide a FULL history in date order

Job Title or Position	Name and address of employer, or description of activity	Dates				Reason for leaving
		From		To		
		Mth	Yr	Mth	Yr	
4.1						
4.2						
4.3						
4.4						
4.5						

4. Previous Employment Continued

4.6							
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4.7							
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4.8							
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4.9							
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Please enclose a continuation sheet if necessary

5. Education and Qualifications

Name of School/College	From	To	Qualifications Gained with <u>Date and Grade/Level</u> Obtained

6. Other relevant experience, interests and skills

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Part 2

This section will be separated from Part 1 on receipt. Relevant contents may be verified prior to shortlisting but will not then be used for selection purposes.

8. Personal Information

Surname or family name				
All previous surnames				
All forenames				
Title				
Current Address				
Postcode				
Resident at this address since				
Home telephone number				
Mobile telephone number				
Date of Birth				
Email address				
National Insurance Number				
Have you ever been barred or restricted from working with children or been subject to an investigation?	Yes	No	If YES give details separately under confidential cover	
Are you subject to any legal restrictions in respect of your employment in the UK?	Yes	No	If YES please provide details separately	
Do you require a work permit?	Yes	No	If YES please provide details separately	
Are you related to or have a close personal relationship with any pupil, employee, or governor?	Yes	No	If YES give details separately under confidential cover	
Are there any special arrangements which we can make for you if you are called for an interview and/or work based assessment?	Yes	No	If Yes please specify, (e.g. ground floor venue, sign language, interpreter, audiotape etc).	
Ethnic Group Please tick	<input type="checkbox"/>	British	<input type="checkbox"/>	Indian
	<input type="checkbox"/>	English	<input type="checkbox"/>	Pakistani
	<input type="checkbox"/>	Welsh	<input type="checkbox"/>	Bangladeshi
	<input type="checkbox"/>	Scottish	<input type="checkbox"/>	Other Asian background
	<input type="checkbox"/>	Irish	<input type="checkbox"/>	Caribbean
	<input type="checkbox"/>	Other White background	<input type="checkbox"/>	African
	<input type="checkbox"/>	White and Black Caribbean	<input type="checkbox"/>	Other Black background
	<input type="checkbox"/>	White and Black African	<input type="checkbox"/>	Chinese
	<input type="checkbox"/>	White and Asian	<input type="checkbox"/>	Other
	<input type="checkbox"/>	Other Mixed background	<input type="checkbox"/>	Not stated

10. REFEREES

Please provide the **full contact details of two referees**. The first referee **must** be your present or most recent employer. If you are not currently working with children, but have previously done so, then please also provide a referee from your most recent employment involving children. **References will not be accepted from relatives or from people writing solely in the capacity of friends, nor will previously prepared references enclosed with this application be accepted.** Please be aware that it is our policy to send for references on all shortlisted candidates in order that references are received before interviews take place.

	First referee	Second referee
Title and Name		
Address and post code		
Telephone number		
Email address		
Job Title		
Relationship to applicant		

11. COMPULSORY DECLARATION OF ANY CONVICTIONS, CAUTIONS OR REPRIMANDS, WARNINGS OR BIND-OVERS

Jobs in schools are exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974.

You must therefore declare ANY convictions, cautions or reprimands, warnings or bind-overs which you have ever had, whether spent or not, and give details of the offences. The fact that you have a criminal record will not necessarily debar you for consideration for this appointment.

Do you have ANY convictions, cautions or reprimands, warnings or bind-overs?

Please tick the relevant box

Yes No

If the answer is "yes", you must record full details in a separate, sealed envelope marked with your name and 'Confidential: Criminal Record Declaration' and enclose it with your application. In accordance with statutory requirements, an offer of appointment will be subject to satisfactory CRB clearance. A copy of this notice will be sent to your referees.

12. DATA PROTECTION ACT

The information collected on this form will be used in compliance with the Data Protection Act 1998. The information is being collected for the purpose of administering the employment and training of employees. The information may be disclosed, as appropriate, to school governors, to Occupational Health, to the General Teaching Council, to the Teachers Pensions Agency, to the Department for Education and Skills, to pension, payroll and personnel providers and relevant statutory bodies. You should also note that the information you have provided on this form may be used to prevent and/or detect fraud.

13. NOTES

- When completed, this form should be returned in accordance with the instruction in the advertisement for the job or in the applicant's information pack.
- Canvassing, directly or indirectly an employee or governor will disqualify the application.
- Candidates recommended for appointment will be required to complete a pre-employment medical questionnaire and may be required to undergo a medical examination.

14. DECLARATION

I certify that, to the best of my knowledge and belief, all particulars included in my application are correct. I understand and accept that providing false information will result in my application being rejected, or withdrawal of any offer of employment, or summary dismissal if I am in post, and possible referral to the police. I understand and accept that checks may be carried out to verify the contents of my application form.

Signature of Candidate

Date

Print Name