

**APPLICATION FOR EMPLOYMENT**

**Support Staff**

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| Applicant’s Name: |  |
| Title of Post: | Pastoral Manager |
| Closing Date: | Wednesday 8 May 2024 |
| Completed application formsshould be returned to: | Human ResourcesHardenhuish SchoolHardenhuish LaneChippenhamWiltshire SN14 6RJ |
| Alternatively, you may wish to return your application form by e-mail to: | hr@hardenhuish.wilts.sch.uk |
| Should you require any additional information in order for you to complete your application please contact: | Mrs Becky Dunn, Recruitment Manager 01249 650693 |

**Guidance Notes:**

* Please complete **ALL** sections of the application form.
* You may wish to continue some of your answers on a separate sheet. Please make sure any additional sheets have your name on them and indicate which section they relate to.

N.B: All information provided on this form will be stored, processed and shared in accordance with our Data Protection Policy and Staff Privacy Notice which are available on our website.

Hardenhuish School is committed to safeguarding and promoting the welfare of children and young people. Successful applicants will be required, as part of their role, to attend regular safeguarding training relevant to the role, and to report any concerns about the safeguarding of children in according with the procedures. All staff are required to read and adhere to our Child Protection and Safeguarding Policies which are available on our website.

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| **Please indicate, by placing an X in the box, how you heard about this vacancy.** |
| **Gazette & Herald** – paper |  | **Hardenhuish School website** |  |
| **Gazette & Herald** – on-line |  | **Word of mouth** |  |
| **Bath Chronicle** - paper |  | **Internal staff application** |  |
| **Bath Chronicle** – on-line |  | **Other** (please specify) |
| **Eteach** |  |

1. **PERSONAL DETAILS**

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| --- | --- | --- | --- |
| Preferred title: Dr, Mr, Mrs, Miss etc |  | Surname |  |
| Forenames |  | Former Surname (if applicable) |  |
| Known as |  | NI Number |  |
| DBS No:(include date issued) |  | E-mail address |  |
| You will be required to produce your original DBS Certificate upon appointment should you be successful. |
| **Home address:****(please include)**House numberStreet nameTownCounty**Postcode** |  | Home telephone number |  |
| Mobile telephone number |  |

**2a. SECONDARY/FURTHER EDUCATION (including NVQs)**

Please include all public examinations passed, including GCSE, NVQ/GNVQ & ‘A’ Levels
(or equivalents).

|  |  |  |  |
| --- | --- | --- | --- |
| **School, College etc****(must include dates attended)** | **Level of Exams****eg GCSE, A-level** | **Subjects** | **Grades** |
|  |  |  |  |

**2b. HIGHER EDUCATION (if applicable)**

For degrees, please specify class and division and whether honours or not.

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| --- | --- | --- |
| **University, Polytechnic, College****(must include dates attended)** | **Qualifications****(with main subjects)** | **Grades** |
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**3. EMPLOYMENT HISTORY & REFERENCES**

Please start with the most recent and work backwards, ensuring that all periods of time are accounted for, **and any gaps in employment are explained**. You may attach an additional sheet if required.

Please note that under Safeguarding Children & Safer Recruitment in Education Guidance, we reserve the right to contact any of your previous employers for a reference. We will also seek details of any disciplinary procedures you may have been subject to involving issues relating to the safety and welfare of children or young people of your suitability to work with them; this will include any disciplinary procedure where the sanction has expired.

**Please note that references may be sought to cover your entire career history prior to interview).**

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| Please indicate in the box with an **X** if you wish to be consulted prior to an approach being made to your current employer for a reference.  However if you are invited to interview a reference will be sought from this employer. |  |

**3a. CURRENT OR MOST RECENT APPOINTMENT**

|  |  |  |
| --- | --- | --- |
| **Current or most recent employer**(please include name of employer/line manager and full address, including postcode) | **Dates of employment** | **Reason for leaving** |
|  | From: |  |
| To: |
| **Tel no:** |  | **Salary level** | **Notice period** |
| **Email:** |  |  |  |
| **Job title:****Main duties:** |

**3b.** **PREVIOUS EMPLOYMENT**

|  |  |  |
| --- | --- | --- |
| **Previous employer**(please include name of employer/line manager and full address, including postcode) | **Dates of employment** | **Reason for leaving** |
| Email: | From: |  |
| To: |
| **Tel no:** |  | **Salary level** | **£** |
| **Job title:****Main duties:** |

|  |  |  |
| --- | --- | --- |
| **Previous employer**(please include name of employer/line manager and full address, including postcode) | **Dates of employment** | **Reason for leaving** |
| Email: | From: |  |
| To: |
| **Tel no:** |  | **Salary level** | **£** |
| **Job title:****Main duties:** |

|  |  |  |
| --- | --- | --- |
| **Previous employer**(please include name of employer/line manager and full address, including postcode) | **Dates of employment** | **Reason for leaving** |
|  | From: |  |
| To: |
| **Tel no:** |  | **Salary level** | **£** |
| **Job title:****Main duties:** |

**3c.** **ADDITIONAL EXPERIENCE e.g Voluntary work, travelling, career gap**

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| --- | --- | --- | --- |
| **Contact details of employer or organisation** | **Dates** | **Details of employment/experience** | **Reason for leaving/ending experience** |
| **From/To** |
|  | From: |  |  |
| To: |
|  | From: |  |  |
| To: |

**4. ADDITIONAL REFERENCES**

References will be sought from your current and previous employer(s) when available. However, when these are not available, or when you have a limited employment history, we may seek a reference from a personal referee. For this purpose, please state the name and address of a person whom you have known for at least three years and who may be approached for a reference prior to interview.

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| --- | --- |
| Name and full address including post code(this must not be someone related to you): | Contact telephone number: |
| Profession: |  |
| Email address: |
|  |
| You **MUST** state the capacity in which you are known to this person: |  |

**5. PEOPLE WITH DISABILITIES**

Whilst you do not have to declare a disability here, Hardenhuish School is committed to promoting employment opportunities for people with disabilities, who can face additional challenges in gaining employment.

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| --- | --- | --- | --- | --- |
| Do you consider yourself to have a disability? | Yes |  | No |  |
| Please indicate if you need any particular aids or modifications to assist you in attending for interview or carrying out the duties of this post. |  |

**6. ADDITIONAL INFORMATION**

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| i) Please describe in more detail any experience, skills etc. you have which are relevant to this job, (referring to the person specification for this post), or any project or voluntary work, caring duties or hobbies that you feel are relevant.ii) Please give your reasons for applying for this post. |
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**7. ADDITIONAL INFORMATION**

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| --- | --- | --- | --- | --- |
| Do you require a work permit? | Yes |  | No |  |
| Do you hold a valid driving licence? | Yes |  | No |  |
| Are you related to or closely acquainted with another employee, governor or pupil? | Yes |  | No |  |
| If Yes, please give the name of the employee, governor or pupil. |  |

**8. HOBBIES AND INTERESTS**

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**Please note:**

* Deliberate omission or falsification of information could lead to the disqualification of your application or later dismissal, if appointed, and possible onward referral.
* The appointment is subject to satisfactory evidence of your medical fitness, and the results of a “Disclosure” from the Disclosure and Barring Service, where applicable.
* Data Protection Statement – Data Protection Act 1998 and 2003. Hardenhuish School has a duty to protect personal information. Hardenhuish School will process this information in accordance with the Data Protection Act 1998 and 2003. This information will be stored on computer and manual files.
* Completion and submission of this form is taken as consent to process the information that you have provided

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| **Please sign and date here to confirm that the information given is accurate** |
| Signed:  |  | Date: |  |
| By submitting this form electronically, you are endorsing that information you have provided within is a true and accurate. |