

Wilmar Lodge, Meins Road, Blackburn BB2 6QU Telephone: 01254 506070 Email: principal@westholmeschool.com

APPLICATION FORM

Please complete this form in full.

Position applied for			
SECTION 1 - PERSON	IAL DE	TAILS	
Title Dr Mr Mrs Miss Ms	Forena	ame(s)	Surname
Date of Birth	Preferr	red name	Former names
Address			Contact details
			Home:
			Work:
			Mobile:
			Email:
National Insurance Numbe	er	Are you currently eligible to the second sec	for employment in the UK? YES NO
(Teachers only) DfE Numb	er	Do you have Qualified Tea	acher status? YES NO
Are you related to or do your lf so, please provide details		tain a close relationship with	n an existing employee, volunteer or Governor?

SECTION 2 - EDUCAT	TION					
UNIVERSITY QUALIFICAT	IONS					
Name of university	Dates of attendance	Degree	Result Class Division	/ Subject(s)		Date awarded
Further degree - name of	university	Degree titl PhD, MBA)	e (eg MSc, and result	Subject(s)		Date awarded
TEACHING QUALIFICATION	ONS					
University/College	Title e.g. PGCE/QTS	Special are	eas of study, in	cluding age range		Date awarded
Name & address of secondary school attende	ed	Age range or 11-18) a number of	nd approx	Type of school (Maintained/ Independent)	Dates (from	s attended /to)
SCHOOL QUALIFICATION	IS					
GCSE results or equivalent	: with grades. Ple	ease state all :	subjects.			
COLLEGE / SIXTH FORM	QUALIFICATION:	S				
Advanced Level results or SUBJECT GR		rades or BTE DATE	C or NVQ, etc SUBJECT	GRADE		DATE
OTHER QUALIFICATIONS						
E.g. diplomas, certificates,	music, drama, IT	, dance, first	aid, technical,	driving		
AWARDING BODY		SUBJECT		L (E.G. ASSOCIATE, CTORATE OR NVQ)	RESULT (GRADE)	DATE AWARDED

SECTION 3 - OTHER VOCATIONAL EXPERIENCE, SKILLS OR TRAINING	
Please provide details of any vocational experience or skills that you possess or training that you has which may not be certificated. Also include details of courses attended over the last three years.	ave received
COURSE	DATE
SECTION 4 - INTERESTS	
Please tell us more about yourself and your interests, for example – community responsibility or in	volvement.
family circumstances, special professional skills or other hobbies, pastimes, etc.	
FOR TEACHING APPLICANTS	
Please indicate the nature and range of extracurricular activities you are involved in/would be willin assist with.	g to

CECTION 7 OTHER VOCATIONAL EVERHENCE CHILLS OR

SECTION 5 - EMPLOYMENT			
Name of current/most recent emplo educational authority then please als of work			:/most recent employer's address - uthority (if applicable)
		School	other/
Current/most recent job title		Date sta	arted
		Part-tim	ne or full-time
Brief description of responsibilities		Date er	nployment ended (if applicable)
		employ	/did you receive any rment benefits? YES NO ease provide details of these
Current salary/salary on leaving			
IF YOU ARE EMPLOYED IN A SCHOOL	OL PLEASE COMPLETE THE	FOLLOW	ING
Age range and number of pupils on roll	Type of school (Maintained/Independent)		Age range taught by you
Reason for seeking other employme	nt		
Please state when you would be ava	ilable to take up employmer	it if offere	d

SECTION 6 -	- EMPLOYMENT HIST	ORY (please inclustant) starting with	ude all employment sin h the most recent first)	ce leaving education -
Job title	Subjects taught (teaching applicants)	Name of employer	Period of service (from/to month and year)	Reason for leaving

SECTION 7 - SUITABILITY (letter of application)
Please give your reasons for applying for this post and say why you believe you are suitable. Briefly summarise any experience and skills you have gained in other jobs or similar environments which demonstrate your ability and aptitude to undertake the duties of the post (as outlined in the job description).

SECTION 8 - HEALTH
The School is an equal opportunities employer and welcomes applications from disabled candidates. The purpose of the following questions is to ensure that the School complies with its obligations under the Disability Discrimination Act 1995 "the Act". For the purposes of the Act a disability is defined as a physical or mental impairment, which has a substantial and long-term adverse effect on a person's ability to carry out normal day to day activities.
Do you consider yourself to be disabled?
If you wish, please give further details here
Are there any special arrangements you might require to attend an interview?
If yes, please give details here
in yes, please give details here
If offered the position applied for, (on the basis of the Job Description provided) are there any arrangements or adjustments that the School would need to make to enable you to carry out the role?
If yes, please give details here
In accordance with the guidance published by the DfE any offer of employment made by the School will be

In accordance with the guidance published by the DfE any offer of employment made by the School will be conditional upon the School verifying the successful applicant's medical fitness for the role. Therefore, if your application is successful, you will be required to complete a medical questionnaire, the responses to which will be assessed by the School's medical adviser.

SECTION 9 - SAFEGUARDING
Have you ever or currently been investigated for a safeguarding issue?
If yes, please give details here
Are you aware of any safeguarding convictions or allegations relating to any of your immediate family or people that you live with?
If yes, please give details here
SECTION 10 - CRIMINAL RECORDS
Due to the nature of our work any convictions, cautions, reprimands or final warnings that are not 'protected'

Due to the nature of our work any convictions, cautions, reprimands or final warnings that are not 'protected' as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013) by SI 2013 1198 (http://www.legislation.gov.uk/uksi/2013/1198/pdfs/uksi_20131198_en.pdf) must be declared. Do you have any convictions, cautions, reprimands, final warnings or bind-overs that are not protected? YES NO Have you been disqualified from working with children, are you named on the Children's Barred List (previously List 99 and the Protection of Children Act List) or are you subject to any sanctions imposed by a regulatory body (e.g. the National College for Teaching and Leadership)? YES NO If 'YES' to any of the above, please provide details on a separate sheet and send this in a sealed envelope marked 'confidential' with your Application Form.

SECTION 11 - REFERENCES

Please supply the names and contact details of two people who we may contact for references. One of these <u>must</u> be your current employer or most recent employer. (If your current/most recent employer does/did not involve work with children, then your second reference should be from your employer with whom you most recently worked with children.) Neither referee should be a relative or someone known to you solely as a friend in line with Safer Recruitment guidelines. The School intends to take up references from all shortlisted candidates before interview.

REFEREE 1	REFEREE 2
NAME	NAME
ORGANISATION	ORGANISATION
ADDRESS	ADDRESS
EMAIL	EMAIL
OCCUPATION	OCCUPATION
RELATIONSHIP TO YOU	RELATIONSHIP TO YOU
TEL	TEL
MAY WE CONTACT PRIOR TO INTERVIEW? YES NO	MAY WE CONTACT PRIOR TO INTERVIEW? YES NO

SECTION 12 - RECRUITMENT

It is the School's policy to employ the best qualified personnel and to provide equal opportunity for the advancement of employees including promotion and training and not to discriminate against any person because of their race, colour, national or ethnic origin, sex, sexual orientation, marital status, religious belief, disability or age. All new posts within the School are subject to a probationary period.

The School is fully committed to safeguarding and promoting the welfare of children and expects all staff and volunteers to share this commitment.

If your application is successful, the School will retain the information provided in this form (together with any attachment) on your personnel file. If your application is unsuccessful, all documentation relating to your application will be confidentially destroyed. However, please indicate below if you would like the School to retain your details on file so that you can be notified of future vacancies which may be of interest to you.

Would you like the School t	o retain your de [.]	ails if your applica	tion is unsuccessful?	L	YES		NC
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SECTION 13 - DECLARATION

- I confirm that the information I have given on this application form is true and correct to the best of my knowledge.
- I confirm that I am not on the DBS Barred List or disqualified from working with children or subject to sanctions imposed by a regulatory body.
- I understand that providing false information is an offence which could result in my application being rejected or (if the false information comes to light after my appointment) summary dismissal and may amount to a criminal offence.
- I consent to the School processing the information given on this form, including any 'sensitive' information as may be necessary during the recruitment and selection process.
- I understand that it is an offence for a person over the age of 18 and in a position of trust to have a sexual relationship with a child under 18, even if the relationship is consensual.
- I confirm that I am not living with a person who has been barred from working with children and further confirm that I do not live in the same household as a person who has been disqualified from working with children under the Childcare Act 2006. If my future circumstances are such that either of the above become relevant I agree to inform my employer immediately. (Only applies if working with children under the age of 8.)
- I confirm that I am not involved in 'extremism', being vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty, mutual respect and tolerance of different faiths and beliefs.

Signature	Date

Please advise where you found out about this vacancy:	
TES	
Westholme website	
Facebook	
Twitter	
LinkedIn	
☐ Word of mouth	
Other (please specify)	

The Disability Discrimination Act 1995 ("DDA") defines a disability as a "physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day to day activities". An effect is long-term if it has lasted, or is likely to last, over 12 months. Do you consider yourself to have a disability under the DDA (please tick)?
YES NO
☐ I used to have a disability but have now recovered.
If you have answered 'Yes' above, please give brief details of your condition.
Please provide details of any adjustments you may require to enable you to attend and participate in the interview (including, for example, induction loop/radio aid/speech to text reporter/BSL interpreter/other).
Please provide details of any adjustments you may require to enable you to undertake the job for which you have applied.
For the purposes of compliance with the Data Protection Act 1998, I hereby confirm that by completing
this form I give my consent to Westholme School processing the data supplied above in connection with monitoring compliance with its equal opportunities obligations and policy. I also agree to the storage of this information on manual and computerised files.
Signature Date

THE DISABILITY DISCRIMINATION ACT 1995



Please return this completed form by: emailing: principal@westholmeschool.com