

Application for the post of



The Elizabeth Woodville School

Application for Support Staff Appointment

| School | |
|--|-----------------------------|
| Please indicate where you saw the advert | tisement for this position: |
| 1 PERSONAL DETAILS | |
| Surname | First Name(s) |
| Title (Mr, Mrs, Miss, Ms etc) | Preferred Name |
| Address | Telephone Numbers |
| | Home |
| | Business |
| | Mobile |
| Post Code | email address |
| Are you aged 16 or over $\ \square$ Yes $\ \square$ No | |
| 2 CURRENT OR MOST RECENT EMPLOYMENT | |
| Name of Employer | |
| Address | |
| Post Code | Telephone Number |
| Position held | |
| Date appointed | Notice required |
| Salary/Wages £ | |
| | |

Please give a brief description of the main duties of this post:

3 PREVIOUS EMPLOYMENT

Start with your most recent job. You should include all paid employment, voluntary work, periods of unemployment and time spent out of employment whilst undertaking caring responsibilities since leaving school, college or university. You may be asked to explain the gaps.

| Name of employer/organisation and full address | Job Title | From Month/Year | To Month/Year |
|--|-----------|-----------------|---------------|
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We reserve the right to approach any of the previous employers listed in this section to confirm the details you have supplied

4 EDUCATION AND QUALIFICATIONS

Please give details of your education and any qualifications obtained. This should include any qualifications which you are studying for now. You will be required to prove you have obtained the qualifications you have listed.

| Secondary School/College/University/Institute | Qualifications and grades achieved | |
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5 TRAINING AND MEMBERSHIPS

Please give details of any training you have had which you feel is relevant to the job you are applying for. Include any on-the-job training as well as formal training courses. There is no need to mention any courses listed in section 4.

| Title of training programme/course and brief description | Date (approx) started/completed | |
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| Membership of Professional Association and Level | Dates | |
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| 6 ADDITIONAL INFORMATION | | |
| Disabilities | | |
| The Council wishes to encourage people with disabilities to a | oply for jobs. | |
| If you have a disability (as defined by the Disability Discrimina post you will receive an interview. | ation Act) and meet the essential criteria for the | |
| Please tick here if you have a disability \square | | |
| You do not have to declare a disability, but you can only be guessential criteria for the job) if you tell us. | aranteed an interview (subject to meeting the | |
| In relation to any disability, would you require special facilities | s or assistance at interview? | |
| Yes □ If yes please give details No □ | | |
| Working in the UK | | |
| Do you require a work permit to work in the UK? | es □ No □ | |
| If yes, please give the date that your current work permit expires (DD/MM/YYYY): (A copy of the permit will be required for successful candidates) | | |
| Please provide your National Insurance Number: | | |

| 7 SUPPORTING STATEMENT | | |
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| Your application form is the only means we have to judge your capability and potential and the information in it will be assessed against the criteria listed on the person specification to draw up a shortlist for the next stage of selection. No assumptions will be made about your experience. | Please leave blank |
|--|--------------------------|
| Please explain below how your experience, skills and knowledge, meet the criteria for the post as described in the person specification. Make sure you address all the criteria on the person specification. Please continue on a separate sheet if necessary | |
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| Certain restrictions apply to the appointment related to existing members of staff. Are you Northamptonshire? If so, please indicate the | closely related to any person | employed in the | |
|--|--------------------------------|---------------------|--------------------------------|
| | | | |
| 9 CRIMINAL CONVICTIONS | | | |
| This appointment is excluded from the Reha which for other purposes are "Spent" and in dismissal or disciplinary action by the Author | the event of employment, faile | ure to disclose suc | ch convictions could result in |
| Have you ever been convicted of a criminal o | offence by a Court of Law | Yes □ | No □ |
| If yes please attach a separate sheet detailing | g the offence(s) with dates | | |
| Signed: | | Date: | |
| A REFEREE DETAILS | B REF | EREE DETAILS | |
| Name | Name | | |
| Position | Position | | |
| Address | Address | | |
| Postcode | Postcod | 9 | |
| Email | Email | | |
| Telephone Number | Telephor | ne Number | |
| | | | |
| Name by which you were known to your re | eferee(s) if different from no |)W | |

If you have indicated NO above, please note that references will be required if you are the preferred candidate after interview.

Yes □

No \square

May we contact your present employer if you are shortlisted?

Please complete declaration over the page.

10 DECLARATION

I declare that the information I have provided is a complete and true statement.

I understand that any offer of appointment and subsequent employment is conditional on this declaration and if my application is incomplete, untrue or inaccurate, then the Governing Body of the school will be entitled to withdraw any offer of appointment or terminate any contract of employment.

I will not approach any elected Councillor or employee of the County Council in order to advance my appointment, as I understand this will disqualify me from consideration, other than if the advertisement invites me to contact a named individual.

I understand that the information provided on this application form will be used to form the basis of a personnel file and a computerised personnel record should an offer of appointment be made. Further details about data protection will follow with any contract of employment.

| Signature: | Date: |
|-------------|-------|
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| Print Name: | |

Support Staff Application - Jan 2009