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**ORCHARD COMMMUNITY TRUST**

**Job Application Form**

Completed application forms should be returned to **recruitment@forestpark.org.uk**

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| 1. **Vacancy Details** | | | |
| **Job Title:** |  | | |
| **Vacancy ID:** |  | **Applicant ID:**  **(for office use only)** |  |
| **School:** |  | **Closing Date:** |  |

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| 1. **Source** | | |
| [www.stoke.gov.uk](http://www.stoke.gov.uk) | www.wmjobs.co.uk | Newspaper (please specify) |
| Professional Journal  (please specify) | Social Media  (please specify) | Other  (please specify) |

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| 1. **Personal Details** | | | |
| **Title:** | Mr Mrs Miss Ms Dr | | |
| **First Name(s):** |  | **Surname** |  |
| **Address:** |  | | |
| **Post Code:** |  | **Email:** |  |
| **Tel No. Home** |  | **Tel No. Mobile** |  |
| **Date of Birth:** |  | **National Insurance No.** |  |

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| **Qualified Teacher Status (if applicable)** | **Yes No** | | | | |
| **DfES Reference no.** |  | | **Date Issued:** |  | |
| **Do you have a full clean driving licence?** | Yes No | **Do you have the ability to travel?** | | | Yes No |

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| 1. **Right to Work in the UK (Asylum and Immigration Act 2006)** |
| If appointed you will be required to provide proof of current and valid permission to be in the United Kingdom and to do the type of work offered. A list of valid documents are available at www.bia.homeoffice.gov.uk |
| Are you able to provide the documents required? |
| 1. **Rehabilitation of Offenders** |
| Orchard Community Trust welcomes applications from all candidates. Unless the nature of the work demands it, you will not be asked to disclose convictions which are ‘spent’ under the Rehabilitation of Offenders Act 1974.    Do you have any unspent convictions?    If YES, please give details of the offence(s), including the date and sentence:  The Rehabilitation Offenders Act 1974 requires applicants to give details of any convictions which are not spent. Failure to disclose such convictions could result in dismissal. |

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| 1. **Criminal Convictions** |
| Do you have 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)?  **Yes No**    If YES, please provide full details below including the date and nature of the offence:  Orchard Community Trust will check with the DBS Service to see if you have any criminal convictions**.** For information regarding filtering of convictions please see: [**https://www.gov.uk/government/publications/dbs-filtering-guidance**](https://www.gov.uk/government/publications/dbs-filtering-guidance)  Are you registered with the Update Service? YesNo    Any information will be treated as confidential. You should note that disclosing a conviction does not automatically bar you from appointment. Failure to disclosure may result in withdrawal of any job offer in relation to this form. |

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| 1. **References** | | | |
| Please give the name and address of two people, one of whom must be your present employer (or in the case of a newly qualified teacher your training establishment and one of your placements). | | | |
| **1.Present/Last Employer :** | | | |
| **Name:** | | **Title/Position:** | |
| **Address:** | | | |
| **Post Code:** | | **Email Address:** |  |
| **Tel No.** |  | **Company:** |  |
| **Tel No. Mob** |  |  |  |
| **2.** | | | |
| **Name:** | | **Title/Position:** | |
| **Address:** | | | |
| **Post Code:** | | **Email Address:** |  |
| **Tel No.** |  | **Company:** |  |
| **Tel No. Mob** |  | **In what capacity do you know the candidate?** |  |

**Please note – in the interest of safeguarding if your post requires you to work with children we will contact your referees prior to an interview. For all other post references will be sought on appointment**

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| 1. **Declaration** | | | |
| I declare that all the information I have provided is true, and I have not canvassed a Member of OCT Trust directly or indirectly, in connection with this application and further to that will not do so. | | | |
| **Signature:** |  | **Date:** |  |
| To your knowledge are you related to any Members/Employees of Orchard Community Trust? Yes No    If YES, please specify who: | | | |

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| 1. **Equality and Diversity - For monitoring purposes only** | |
| **Gender:** | Female Male Prefer not to say    Applicants should answer this question according to their current gender presentation, which may be different to that assigned at birth |
| **Marital**  **Status** | Single Married Civil Partner Widowed    Divorced Dissolved  Separated  Prefer not to say |
| **Sexual Orientation** | Opposite Sex (Heterosexual)  Opposite and Same Sex (Bisexual)  Same Sex (Lesbian/Gay)  Prefer not to say |
| **Disability** | Do you consider yourself to be disabled under the Equality Act 2010? |
| **Ethnic Origin** | **White Mixed Asian/Asian British**  British  White/Asian Pakistani  Irish  White/Black African Indian  Irish Traveller  White/Black Caribbean Bangladeshi  Gypsy/Roma  Other/mixed Other Asian  Other White  **Black/Black British Chinese/Other**  African Chinese  Caribbean Other  Other Black  Prefer not to say  Other Please State:\_\_\_\_\_\_\_\_\_ |
| **Religion/Belief** | I would describe my religion and belief as:­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_    No religious Belief Prefer not to say |

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| 1. **Education Secondary, Further (continue on a separate sheet if required)** | | | | | | | |
| **Name of School/College/University** | | **Qualification** | | **Subject** | **Dates** | | **Grade** |
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| **Professional Qualification/ Membership of Professional Bodies inc DfES/GTC** | | | | | | | |
| Name of Professional Body/Association | Current Level of Membership | | Method of Achievement (eg. Application; examination; invitation) | | | Membership Number | |
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| 1. **Training and Development (continue on a separate sheet if required)** | | | |
| **Training** | **Date Completed** | **Training** | **Date Completed** |
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| 1. **Supporting Information (continue on a separate sheet if required)** | | | | | |
| **Please tell us why you are suitable for the job and provide as much information as you can about your skills, abilities, knowledge and experience.** | | | | | |
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| 1. **Current/Last Employment \* Previous employers may be contacted to validate information provided.** | | | | | |
| **Name of Employer** |  | | | | |
| **Address** |  | | | | |
| **Post Code** |  | | **Telephone Number** |  | |
| **Job Title** |  | | **Local Authority** |  | |
| **Date: From** |  | | **Date: To** |  | |
| **Salary including details of allowances/benefits e.g. TLR, SEN, R&R Leadership Range** |  | | | | |
| **Brief Description of your current/Last Job** | | | | | |
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| **Reason for leaving/wanting to leave** | |  | | **Notice Period** |  |

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| 1. **Previous Employment \* Start with the most recent (continue on a separate sheet if required).** | | | |
| **Name of Employer** |  | | |
| **Address** |  | | |
| **Post Code** |  | **Tel No.** |  |
| **Job Title** |  | **Salary** |  |
| **Date From** |  | **Date To** |  |
| **Brief Description of your role** | | | |
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| **Reason for Leaving** |  | | |

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| **Name of Employer** |  | | |
| **Address** |  | | |
| **Post Code** |  | **Tel No.** |  |
| **Job Title** |  | **Salary** |  |
| **Date From** |  | **Date To** |  |
| **Brief Description of your role** | | | |
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| **Reason for Leaving** |  | | |

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| **Name of Employer** |  | | |
| **Address** |  | | |
| **Post Code** |  | **Tel No.** |  |
| **Job Title** |  | **Salary** |  |
| **Date From** |  | **Date To** |  |
| **Brief Description of your role** | | | |
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| **Reason for Leaving** |  | | |

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| **Name of Employer** |  | | |
| **Address** |  | | |
| **Post Code** |  | **Tel No.** |  |
| **Job Title** |  | **Salary** |  |
| **Date From** |  | **Date To** |  |
| **Brief Description of your role** | | | |
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| **Reason for Leaving** |  | | |

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| **If you have any gaps in your employment or education, please explain them here (continue on a separate sheet if required)** |
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| **Please detail below any dates when you would not be able to attend an interview. Every effort will be made to avoid these dates but this may not always be possible.** |
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***General Data Protection Regulation (UK GDPR)***

If my application is successful, I hereby give my consent for the information provided on this application form to be held on computer or other relevant filing systems and to be shared with other accredited organisations or agencies in accordance with the General Data Protection Regulation (UK GDPR).

If my application is unsuccessful, I understand that it will remain on file for six months and then destroyed.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In line with GDPR, please ensure you complete the following form to enable your references to be collected regarding attendance and disciplinary data.

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**Permission from Candidates in relation to references:**

**Title** Mr/Mrs/Miss/Ms/Dr

**Full candidate name: ­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Position applied for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I have applied for the above position

I understand that in order to complete my application for interview stage, references must be sought on my behalf and are a statutory requirement for any employee or volunteer position within education in line with Safer Recruitment in Education.

I hereby grant full permission for my professional records including attendance and disciplinary data to be shared with Orchard Community Trust.

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_