

## Confidential

## SUPPORT STAFF APPLICATION

# Rutlish School

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| APPLICANT INFORMATION | |
| **Position Applied for** |  |

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| PERSONAL DETAILS | | | | | | | | | |
| **Surname:** |  | | Forename: | | |  | Mr, Mrs, Ms, Miss, Other  *Please circle* | | |
| **Preferred name:** |  | | Previous names ie maiden name: | | | |  | | |
| **Address including postcode:** |  | | | | | | | | |
| **Daytime phone:** |  | | | **Mobile:** | |  | | | |
| **Home phone:** |  | | | **E-mail address:** | |  | | | |
| **National Insurance No.:** | | | |  | | | | | |
| **Do you require a work permit to work in the UK?** | | Yes | | No | **Can we contact you at work?** | | | Yes | No |
| *We will contact you by email and/or telephone wherever possible.* | | | | | | | | | |

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| CURRENT OR MOST RECENT JOB | | | |
| Name and address of your current or most recent employer, including postcode | | | |
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| **Job title** |  | | |
| **Date you started** |  | **Current salary** |  |
| **Department or section** |  | **Date you left**  **(if applicable)** |  |
| **Notice you need to give your current employer** |  | **Reason for leaving** |  |
| **Are you currently employed by the London Borough of Merton?** | | Yes  No | |

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| CURRENT OR MOST RECENT JOB |
| **Please give a brief description of your main duties and responsibilities** |
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| EMPLOYMENT HISTORY (PUT THE MOST RECENT FIRST) | | | |
| Please provide details of your complete employment history, starting with your most recent job. If you have had any breaks in employment (for example periods of unemployment, study, raising a family or temporary, voluntary or community work) please give full details of these periods. Continue on a separate sheet if necessary. | | | |
| **Name and**  **full address of employer** | Dates of employment | **Job title and main duties** | Reason for leaving |
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| EDUCATION AND QUALIFICATIONS | | |
| **Name of school/college/university** | Qualifications | Date |
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| TRAINING | | |
| Please give details of any relevant qualifications, courses or training that you have taken. | | |
| **Name of organising body** | Course or training undertaken | Date |
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| MEMBERSHIP OF PROFESSIONAL BODIES | | |
| **Name of body/association** | Membership grade and number | Date |
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| RELEVANT JOB INFORMATION |
| Please use this space to tell us how your skills, knowledge and experience match the requirements of the job as it is described in the person specification. Please address all the criteria in the person specification. Use examples from your previous jobs, education, training or other activities (for example family, leisure, and voluntary or community work) to support your application. Please continue on a separate sheet if necessary.  Please do not enclose a CV as we will not consider it. |
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| REFEREES | | | |
| We reserve the right to go to any past employer for a reference and will always seek references to cover a full five-year history. Your first referee must be your current or last employer if you have one. Relatives will not be accepted as a referee. If offered the position, in addition to information on ability and performance, we will be seeking information on recent sickness. | | | |
| **Full name and address of first referee - your current, or most recent employer:** | | Full name and address of your second referee: | |
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| **Phone number:** |  | Phone number: |  |
| **Fax:** |  | Fax: |  |
| **Email:** |  | Email: |  |
| **What is this person’s relationship to you?** |  | What is this person’s relationship to you? |  |

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| DRIVING LICENCE |
| **Only complete this section if driving a vehicle is a requirement of the job for which you are applying.** |
| Do you hold a current, clean driving license? Yes  No  (Please tick)    If required, are you prepared to use your car for work purposes? Yes  No  (Please tick)  *Please state which categories of vehicle you hold* |

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| **PROTECTION OF CHILDREN (Rehabilitation of Offenders Act 1974)** | | | |
| **We are committed to safeguarding and promoting the welfare of children and young people and expect all staff and**  **volunteers to share this commitment. All our posts are subject to a satisfactory Disclosure and Barring Service (DBS) check.**  **The job for which you are applying has substantial opportunity for access to children. Your employment is therefore exempt from the Rehabilitation of Offenders Act 1974. You will be required to complete a Disclosure and Barring Check (DBS). You must therefore give details of any convictions or pending prosecutions you have, even if they would otherwise be regarded as ‘spent’ under this Act.**  **Have you been convicted of a criminal offence other than a road traffic offence not involving injury to a third party, or a sentence of imprisonment? Yes**  **No**  **If yes, please provide details below:** | | | |
| **Date** |  | **Offence** |  |
| **Sentence** |  | | |
| **Please note: All information we receive will be treated as confidential** | | | |

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| ADDITIONAL INFORMATION | | | |
| **DISCLOSURE OF RELATIONSHIP** | | | |
| **Are you related to, or do you have, a close personal relationship with any Merton Councilor, Council Officer or**  **School Governor?**  Yes  No  (Please tick)  If ‘Yes’, please state their name, relationship and position held | | | |
| **Do you have any business or financial interests which might conflict with the duties of the job or any council activity?**  Yes  No  (Please tick)  If ‘Yes’, please give details | | | |
| **The London Borough of Merton has a duty to protect the public funds it administers, and to this end may use the information you have supplied in your application within this authority for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for these purposes.**  **Some posts are also subject to political restrictions under the provisions of the Local Government and Housing Act 1989. If this post is subject to these conditions, further details will be made available to you.**  **Declaration**  **I declare that as far as I know and believe the information on my application and any supporting documentation that I have provided has been filled in fully and accurately. I understand this information may be used for registered purposes under the Data Protection Act 1998. I authorise the London Borough of Merton to check the information I have supplied. If I am appointed to the post, I understand that if the information I supply is not accurate or is false, the School could withdraw an offer of employment or terminate my contract. I understand that if I do not agree to this declaration the School cannot consider my application.** | | | |
| **Signature** |  | **Date** |  |

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| By providing my name or email address, I confirm that I have read, understood and agreed to the above. |

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| **Your name** |  | **Position applied for** |  |

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| **EQUAL OPPORTUNITIES MONITORING INFORMATION** |
| **To make sure we are carrying out recruitment fairly we record the ethnicity, gender and disability of people who apply for jobs. We will treat your answers as strictly confidential and will only use the information you provide for monitoring purposes. We will use the information you provide on this form to produce anonymous statistics to help us with equal opportunities.** |

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| **Sex** | Male  Female  Non-binary  Prefer not to say | | Date of birth |  |
| **How would you describe yourself (categories are based on the 2011 census)?** | | | | |
| A. White | | British  Irish  Other  (Please give details) | | |
| B. Mixed | | White and black Caribbean White and black African  White and Asian  Other mixed group  (Please give details) | | |
| C. Asian or Asian British | | Indian  Pakistani  Bangladeshi  Tamil  Other Asian  (Please give details) | | |
| D. Black or Black British | | Caribbean  African  Other black background  (Please give details) | | |
| E. Chinese or other ethnic | | ChineseKoreanAny other ethnic group(Please give details) | | |

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| **Do you consider yourself to be disabled?**  **(*The Disability Discrimination Act 1995 defines a disabled person as someone with “a physical or mental impairment which has a substantial and long term effect on his or her ability to carry out normal day-to-day activities”.)*** |
| **Yes**  **No**  **Prefer not to say**  **If yes, please tick one of the following:**  Hearing impairment  Speech impairment  Visual impairment  Mental health (i.e. depression, stress)  Progressive condition (i.e. cancer, HIV)  Learning difficulties  Dyslexia  Diabetes  Physical disabilities  Other – please specify …………………………………. |

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| **What is your faith/belief? (categories are based on the 2011 census)** |
| None  Christian  Buddhist  Hindu  Muslim  Jewish  Sikh  Other |
| **How do you describe your sexuality? (categories are based on the 2011 census)** |
| Bisexual  Gay man or lesbian  Heterosexual  Prefer not to say |