

Vacancy title:	
Closing date:	
Ref. number:	
School/ Establishment:	OAKLEIGH SCHOOL

Application Form

for non-teaching/support posts

Barnet Council is committed to protecting and safeguarding children and vulnerable adults. We apply stringent safer recruitment practices.

Please ensure that all sections are completed (using black ink or type), otherwise your application will not be considered. If you are attaching a C.V. in addition to your application form please ensure that it relates to the Person Specification. All information that you provide will be treated as confidential. The Declaration of Criminal Offences form must be completed. If you require any reasonable adjustments as part of the application or selection process please contact us.

1. About you

Title: _____

First names: _____

Previous names: _____

Surname: _____

Previous surnames: _____

National Insurance No. _____

Address: _____

Town: _____

Postcode: _____

Email: _____

Mobile: _____

Daytime telephone number _____

Evening telephone number _____

May we contact you at work? Yes No

Where did you see this vacancy advertised?
(publication/website) _____

Please return this form to:

2. Employment history

Please list your current and all previous employers. Any gaps in employment must be explained and a continuation sheet used if required.

Employers' names, addresses and type of business	Job title, Key responsibilities, final salary and any allowances	Dates of employment From To		Reason for leaving

3. Other relevant experience

Please give details of any voluntary, unpaid or community work and also any experience/skills acquired outside of employment, including running your home and caring for dependants/family. Your experience should be related to the skills, abilities and knowledge outlined in the person specification and job description/role profile.

Type of experience	Dates

4. Education, qualifications and training – any gaps must be explained and a continuation sheet used if required.

Name of school, college, university etc.	Name of course	Dates		Qualification/grade achieved
		From	To	

5. Professional association membership

Name of professional association	Year of membership	Grade/level

6. Personal statement

Relevant abilities, skills, knowledge and experience

Tell us how you meet all of the short listing criteria set out in the enclosed Person Specification, drawing on all aspects of your education and experience, including paid employment and unpaid work.

Are you applying with a job share partner? Yes No

Please specify hour/day arrangement _____

Are you required to have a UK work visa/permit? Yes No

If yes, do you have a valid visa/permit? Yes No

If yes, when does it expire? dd/mm/yyyy

Do you have a full current driving licence valid in the UK? Yes No

7. References

Please give details of two referees from whom confidential enquiries may be made. Your referees should be from your current or most recent employer or your current educational establishment. References are normally taken up following interview. We reserve the right to contact any of your previous employers. Educational referees should only be given where this will be your first employment following qualification. If you are applying for a post which involves working with children or vulnerable adults you will be required to supply references which go back 5 years. Please attach these on a separate sheet.

Name of referee:	_____	Name of referee:	_____
Job title:	_____	Job title:	_____
Organisation:	_____	Organisation:	_____
Address:	_____	Address:	_____
Telephone:	_____	Telephone:	_____
Email:	_____	Email:	_____
Capacity in which known to you:	_____	Capacity in which known to you:	_____
Please indicate if you do not want your referee to be contacted prior to offer <input type="checkbox"/>		Please indicate if you do not want your referee to be contacted prior to offer <input type="checkbox"/>	

8. Declaration

<p>All applicants are required to declare personal relationships with existing Council employees and Council members. Canvassing of elected councillors or officers involved in the selection process directly or indirectly will automatically disqualify the applicant.</p>	<p>Any financial interests that applicants may have in contracts with the Council or pending Council tenders must be declared.</p>
<p>Are you related to, or a close friend of, any elected councillor or member of staff employed by Barnet Council? Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Are you or any of your relatives party to an existing Council contract or involved in any competitive tendering process? Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>If yes, please state their name and your relationship with them:</p>	<p>If yes, specify the contract details:</p>
<p>Name:</p>	
<p>Relationship:</p>	

I certify that, to the best of my knowledge, the information I have provided on this form, and on my completed declaration of criminal offences form, is true and accurate. I understand that if the information I have supplied is false or misleading in any way, it will automatically disqualify me from appointment or may render me liable to dismissal without notice. I give explicit consent that the information provided by me on this form may be processed in accordance with the Council's registration under the 1998 Data Protection Act and authorise the disclosure of personal data when references are taken up.

Signed – Applicant:

Date: dd/mm/yyyy

Please note that successful candidates will be required to sign their application form prior to appointment.

Declaration of criminal offences

Please read the following notes carefully.

You must inform us of any offences, convictions, cautions, bindovers or of any court cases that you have pending. Under the provision of The Rehabilitation of Offenders Act 1974, some job applicants do not have to disclose information on certain convictions after a set period of time, as they become 'spent' (see table below).

The Rehabilitation of Offenders Act 1974 applies to offences where a custodial sentence in prison (or detention in a young offenders institution) of less than 30 months was imposed. It is the sentence imposed by a court that counts (even if a suspended sentence), not the time spent in custody.

Any prison sentence greater than 30 months never becomes 'spent'.

For some jobs, all convictions must be declared and can never be considered 'spent'. For more information, please see the section below entitled 'exemptions' and information on the person specification. Failure to declare may result in the job offer being withdrawn.

1. Rehabilitation periods

Sentence	Time elapsed since conviction
Absolute Discharge	6 months
Borstal/Youth Custody	7 years
Care or Supervision order	1 year or until order expires (whichever is the longest)
Detention Centre	3 years
Fine or other sentence for which the Act does not specify a different rehabilitation period	5 years*
Hospital order (with or without a restriction order)	5 years, or 2 years after the order expires
Imprisonment or youth custody sentence of less than 6 months	7 years*
Imprisonment or youth custody sentence of over 6 months but not more than 21/2 years	10 years*
Order for custody in a remand home, approved school order or an attendance centre order	1 year after order expires
Probation order, conditional discharge or bound over	1 year or until order expires (whichever is the longest)

* The above times are halved if the offender was under 18 when the offence was committed.

2. Exemptions

If you are applying for a job in any of the following categories, you must inform us of all offences, convictions, bindovers or of any court cases pending. All convictions must be declared and can never be considered spent:

1. Work involving access to children

- a) Any post whose normal duties involve carrying out work of any sort in the following establishments
- a care or residential home exclusively or mainly for children
 - an educational institution (school, college, nursery)
 - a children's home
- b) A position whose normal duties include, caring for, training, supervising or being in sole charge of children (social workers, teachers, youth workers, leisure and recreation posts, care staff, staff responsible for accommodation)
- c) Day care premises during periods when children are present
- d) A position whose normal duties involve unsupervised contact with children under arrangements made by a parent/guardian
- e) A supervisor or manager of an individual in categories a-d.
- f) Senior posts responsible for education or social care functions of a local authority, e.g. a Chief Education Officer

2. Work involving access to vulnerable adults

Any employment concerned with the provision of care services to vulnerable adults which enables the employee access to vulnerable adults in the course of normal duties

A person aged 18 or over is considered vulnerable if she/he has any or a combination of the following factors:

- a substantial learning or physical disability
- a physical or mental illness, chronic or otherwise
- an addiction to alcohol or drugs
- a significant reduction in physical or mental capacity

3. Positions of trust

Specific posts relevant for local government are;

- solicitor
- accountant
- traffic warden/parking attendant

If you are offered a job in these categories, you will also be required to complete a further form to authorise the council to undertake a criminal record check.

3. Declaration of criminal offences

Using the above guidelines, please list all your cautions and criminal offences. You must include any pending convictions and indicate that they are pending in the column 'Place and date of judgement(s)'.
If you have no convictions please write NONE and sign the form.

Your application will not be considered without completion of this section.

Nature of offence(s)	Details of offence(s)	Place and date of judgement(s)	Sentence(s)

All information given will be treated in the strictest confidence and will be used for this job application only.

I certify that, to the best of my knowledge, the information on this form is true and accurate. I understand that if the information I have supplied is false or misleading in any way, it will automatically disqualify me from appointment or may render me liable to instant dismissal without notice.

Signed - Applicant:

Date (dd/mm/yyyy):

Name (please print)

Please note that successful candidates will be required to sign their application form prior to appointment.

Diversity Monitoring Form

Barnet Council aims to have a workforce that reflects the diversity of talent, experiences and skills of our communities.

We monitor the composition of our workforce to ensure that it is representative and that all staff are treated fairly. In addition, we are committed to promoting race equality, under the Race Relations (Amendment) Act 2000, which applies to everything the Council does. The information you give on this form will remain strictly confidential, in accordance with the Data Protection Act 1998, and will not affect any decision to employ you.

Name	Job ref
Post applied for	
Are you applying on a job share basis?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you applying with a job share partner?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you currently work for Barnet?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, what is your Payroll number?	
Where did you see this job advertised?	Date of Birth: dd/mm/yyyy
Age	<input type="checkbox"/> Under 20 <input type="checkbox"/> 20-29 <input type="checkbox"/> 30-39 <input type="checkbox"/> 40-49 <input type="checkbox"/> 50-59 <input type="checkbox"/> 60 and over

Disability

The Disability Discrimination Act 1995 defines a disability as, 'A physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities'. In this definition, long term is taken to mean more than 12 months and would cover long term illness such as cancer and HIV or mental health problems.

Do you consider that you have a disability under the Disability Discrimination Act definition?
 Yes No

If you have answered 'Yes', please select the definition/s from the list below that best describes your disability/disabilities:

Hearing (such as: deaf, partially deaf or hard of hearing)	<input type="checkbox"/>	Reduced physical capacity (such as inability to lift, carry or otherwise move everyday objects, debilitating pain and lack of strength, breath, energy or stamina, asthma, angina or diabetes)	<input type="checkbox"/>
Vision (such as blind or fractional/partial sight. Does not include people whose visual problems can be corrected by glasses/contact lenses)	<input type="checkbox"/>	Severe disfigurement	<input type="checkbox"/>
Speech (such as impairments that can cause communication problems)	<input type="checkbox"/>	Learning difficulties (such as dyslexia)	<input type="checkbox"/>
Mobility (such as wheelchair user, artificial lower limb(s), walking aids, rheumatism or arthritis)	<input type="checkbox"/>	Mental illness (substantial and lasting more than a year, such as severe depression or psychoses)	<input type="checkbox"/>
Physical co-ordination (such as manual dexterity, muscular control, cerebral palsy)	<input type="checkbox"/>		
Other disability (please specify)	<input type="checkbox"/>		

Ethnicity

Asian or Asian British

- Bangladeshi
- Indian
- Pakistani

Black or Black British

- African
- Caribbean

Mixed

- White and Asian
- White and Black African
- White and Black Caribbean

Other

- Chinese

White

- British
- Greek
- Greek Cypriot
- Irish
- Turkish
- Turkish Cypriot
- Other

Other

Other

Other

Other

Other

If you selected any of the 'Other' categories, please tell us how you would further describe yourself

Faith (Optional Information)

- Agnostic Atheist Baha'i Buddhist Christian
- Hindu Humanist Jain Jewish Muslim
- Sikh No religion Other faith (please specify)

Gender

- Female Male

Sexuality (Optional Information)

- Bisexual Gay Heterosexual Lesbian

In addition, if you prefer to define your sexuality in terms other than those used above, please let us know.

Declaration:

I have completed the details required in this document and declare to the best of my knowledge the information given is correct. I consent to it being held on file under the terms of the Data Protection Act 1998.

Signed - Applicant:

Date (dd/mm/yyyy)

Please note that successful candidates will be required to sign their application form prior to appointment.

For office use only

Application withdrawn

Post withdrawn

Shortlisted Yes No

Appointed Yes No