

EDUCATION SERVICES

JOB APPLICATION FORM

APPOINTMENTS - NON TEACHING

Please write in capital letters in Black Ink or type. Please do not include CV.				
Application for the post of:				
Name of School/College:				
Reference No:		(For Office	Use only)	
PERSONAL DETAILS				
Surname:	Forename(s):			
Address:				
	Postcode: .			
Home Tel:	Daytime/Work Tel:			
EDUCATION (INCLUDING FURTHER	/HIGHER EDUCATION)			
Secondary School/College/University	Examination taken or to be taken	Date	Results (with grades)	
		1	1	

MEMBERSHIP OF PROFESSIONAL BODIES

Please list below any Institution or Society of which you are a member, the class of membership, the date obtained and state if by examination.

PRESENT EMPLOYMENT (Do not complete the	is section if you are not currently employed.)
Address of Employer:	
	Employer's Tel No:
Post Held:	Salary/Grade:
Date of Appointment:	Notice Required:

PREVIOUS EMPLOYMENT (MOST RECENT FIRST)

(Please give your complete employment history and continue on a separate sheet if necessary.)

Date		Post Held & Grade	Name and Address of	Reason for leaving	
<u>From</u>	То		Previous Employers		

VOLUNTARY / UNPAID ACTIVITIES

Time Input	Position Held	Organisation	Brief details of duties (can be expanded in next section)

RELEVANT EXPERIENCE

Please read the Job Description and Person Specification carefully, then describe how your knowledge, skills and experience relate to this post. These may have been gained through paid employment, domestic responsibilities, voluntary/community work, spare time activities and training. (Do not use more than two sides of A4 as continuation sheets.)

North Yorkshire County Council - Schools - Equalities Monitoring Form.

North Yorkshire County Council support the principles of equality of opportunity in employment. The aim of the Authority is to ensure that all employees and all job applicants receive equal treatment.

In order to assist the Authority in monitoring its Equalities Policy your co-operation in providing the information requested below would be appreciated. This information will not form part of your application, but will be separated from your application form upon receipt. The information provided will be used purely for statistical purposes.

PL	PLEASE USE CAPITAL LETTERS OR PLACE A CROSS IN BOXES WHERE APPLICABLE.					
1.	To which school/college are you applying?					
2.	Gender: Male Female					
3.	Age: Under 18					
4.	Please indicate whether the post is: (mark all that apply)					
	Full Time Part Time Job Share Term-time Casual/Relief Fixed Term/Temp Other					
5.	Do you consider yourself to have a disability? Yes No Note: the Disability Discrimination Act states that: "a person has a disability for the purpose of the Act if he/she has a physical impairment which has a substantial and long-term adverse effect on his/her ability to carry out normal day to day activities". DDA 1995.					
6.	Please enter Job Title of the post for which you are applying for					
7.	Please enter Salary Scale or Grade/Hourly rate of the post for which you are applying					
8.	Where did you see the vacancy advertised?					
9.	Are you currently employed by NYCC?					
10.	If Yes, is application for a post of similar level or promotion?					

11.	Please note: the categories below are taken from the 2001 Census. The council is require to use this format for its monitoring exercises.			
	What is your ethnic group? Please choose one section from (a) to (e), and then place a cross in the appropriate box to indicate your cultural background.			
	(a)	White		
		British		
		Irish		
		Any other white background	(please state)	
	(b)	Mixed		
		White and Black Caribbean		
		White and Black African		
		White and Asian		
		Any other mixed background	(please state)	
	(c)	Asian or Asian British		
		Indian		
		Pakistani		
		Bangladeshi		
		Any other Asian background	(please state)	
	(d)	Chinese or other Ethnic Group		
		Chinese		
		any other ethnic group	(please state)	
THANK YOU FOR COMPLETING THIS QUESTIONNAIRE				
M	Month / Year selection process undertaken			

REFERENCES:

Please give the name and addresses of two referees (not relatives) one of whom should be your present employer (or last employer if not currently employed). If you are in, or have just completed, full time education, one referee should be from your College/University.

Name:	Name:
Address:	Address:
Position held:	Position held:
Telephone:	Telephone:
May your referee be approached prior to interview? Yes / No	May your referee be approached prior to interview? Yes / No

DECLARATIONS

- 1. The applicant should state whether to his/her knowledge, he/she is related to any member of, or to the holder of any senior office under, the County Council, or to any governor of the school.
- 2. This document is subject to medical clearance and to national procedures for the disclosure of criminal background of those with access to children, which will be checked by the Criminal Records Bureau. Because of the nature of the work for which you are applying, this post is exempt from the provisions of the Rehabilitation of Offenders Act 1974 (Exceptions) (Amendment) Order 1986, Section 4 (2) of the Rehabilitation of Offenders Act 1974 does not apply to this question. You are <u>not</u> entitled to withhold information about a previous conviction on the grounds that it is for other purposes spent under the act. In the event of employment, any failure to disclose such convictions will normally result in dismissal by the Authority. Any information given will be completely confidential and will be considered only in relation to an application for positions to which the order applies. A criminal conviction does not preclude consideration for employment.
- Please give brief details of any absences of three days or more which you have had in the last five years due to sickness(please use an additional sheet if necessary)
 Date on which applicant could take up duty if appointed
 I confirm that the information I have provided is correct.

 Signed:
 Date:

This application form should be completed in full and returned, together with a letter of application addressing any issues identified in the information provided, to the address indicated by the specified date. Applicants requiring an acknowledgment of receipt should please enclose a stamped self addressed envelope or postcard.

FOR OFFICE USE ONLY:

Not Shortlisted	Shortlisted	Interviewed	Unsuccessful	Offered	Appointed

6 Ref: ES 9945/02.04