

Dollar Academy, Dollar, FK14 7DU

01259 742511 www.dollaracademy.org.uk

APPLICATION FORM - TEACHING STAFF

This form is available electronically on the Academy website (www.dollaracademy.org.uk). The form must be completed for an application to be considered and should be signed and posted to the address above. (If you wish to include a copy of your CV, please do so).

If completing by hand, please print clearly and use black ink.

Post applied for	
Personal details	
Title (Mr, Mrs, Miss, Ms, Dr, Other)	
Full name (Please underline the	
names by which you like to be known) Current sumame and former	
sumames (e.g. maiden name with	
dates used)	
Current address (this will be used for	
comespondence)	
,	
If resident at current address for	
fewer than five years, please	
provide previous addresses during	
this period	
e-mail address	
Te le p ho ne: Ho me	
Te le p ho ne : Wo rk	
Te le p ho ne : Mo b ile	
National Insurance number	
Do you hold a valid PGCE or	
e q uiva le nt?	
If so, what date was it awarded?	
Are you registered with the GTC or	
GTC S?	
If so, please state yournumber	
If you are already a member of the	
Disc lo sure Scotland Protection of	
Vulnerable Groups (PVG) Scheme	
please provide your membership	
number	

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Establishment and Dates (month and year) attended (including school)	Subject and Awarding Body	Grade/Class (if appropriate)

Care er History

Please supply a full history, in chronological order with start and end dates, of all employment, self-employment and any periods of unemployment since leaving secondary education. Please provide explanations for any periods not in employment, self-employment or further education/training and in each case any reasons for leaving previous employment. Please include details of all relevant training courses attended.

Da te s	Employer/SelfEmployed	Sa la ry

Please list the co-curricular activities that you would be able to offer. (All teachers at Dollar Academy are expected to make a significant contribution to the co-curricular programme of the school).

Ac tivity	Interest, experience and (where appropriate) qualification in this activity

Basis of Interest in the post:	
Please use the space below to	describe your reasons/motivation for this application. (A separate
sheet may be used if more space	is required.)

Existing contacts with Dollar Academy Please indicate if you know any existing employees or governors at the Academy and, if so, how you know them.
Referees: Please provide at least two referees. One referee should be your current or most recent employer. Where you are not currently working with children but have done so in the past, one reference must be from the employer by whom you were most recently employed in work with children. Please note, references will not be accepted from relatives or from referees writing solely in the capacity of friends.
(Please give name, address, contact telephone number and e-mail address)
General: How did you hear about this vacancy?
Health: Systems are in place to help staff with medical issues and the Academy utilises an occupational health advisor when applicable. A confidential employee counselling service is also available.
Are you a "qualifying person" within the 1995 Disability Disc rimination Act?

Equal Opportunities:

It is the policy of Dollar Academy to provide equal employment opportunities for all qualified individuals and to prohibit discrimination in employment on any basis protected by applicable law, including, but not limited to, race, colour, religious creed, marital status, sex, sexual orientation, ancestry, national origin, age, medical condition or disability. Dollar Academy promotes equal employment opportunities in all aspects of employment through positive employment policies and practices. The Academy will make reasonable adjustments to accommodate disabilities of both successful applicants and prospective applicants.

Ple a se give interview?	d e ta ils	of any	special	re q uire m e	nts tha	t should	bе	p ro vid e d	if you	are	invite d	to

DECLARATION

This post is exempt from the Rehabilitation of Offenders Act 1974. You are, therefore, required to disc lose all convictions, cautions, and bind-overs, including those regarded as 'spent', and declare as follows:

❖ I have no convictions, cautions or bind-overs, including any that are regarded as 'spent' under the Rehabilitation of Offenders Act 1974.

\mathbf{OR}

❖ I enclose details of convictions, cautions or bind-overs, which include those regarded as 'spent' under the Rehabilitation of Offenders Act 1974 in the enclosed sealed envelope marked 'Strictly Private and Confidential – for the attention of the Rector.

❖ DELETE ONE PARAGRAPH, AS APPROPRIATE

AND

- 1. I have not been disqualified from working with children, am not named on DCSF List 99 or the Protection of Children Act List, or subject to any sanction by a regulatory body, eg General Teaching Council of Scotland, that debars me from having unsupervised and sole access to children and young adults.
- 2. I understand that providing false information is an offence and could result in this application being rejected, summary dismissalif selected for the post, and possible referral to the police.
- 3. If called for interview, I consent to an application to Disclosure Scotland being processed by Dollar Academy.
- 4. I understand my qualifications will be checked once an offer has been made and I shall be required to show, and have copied, original certificates.

Sig ne d	 	 	 _
Name	 	 	 _
Da te			