

# Confidential

# Application for Employment

Application Number

*Principal: **Graham Wilkinson***  
*Kendal College, Milnthorpe Road, Kendal, Cumbria LA9 5AY*  
*Tel: 01539 814700 Fax: 01539 814701 E-mail: [Personnel@kendal.ac.uk](mailto:Personnel@kendal.ac.uk)*

This application form can be submitted either on line or printed and posted (if you have a disability and you wish to receive this form or submit it in another format, such as large print or audio tape, please contact Personnel on 01539 814742. Please complete all sections. If you would like to include your CV as an added extra, feel free, but you must complete this form as well.

To enable those shortlisting to do so without regard to gender, age, ethnic, disability or other equal opportunity considerations, we ask you to complete your personal details on this front page. This is then detached from the application by Personnel and not seen by the shortlisting panel.

**Post Applied for:** \_\_\_\_\_

Surname: \_\_\_\_\_ Forenames: \_\_\_\_\_

Previous/Other Names: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Daytime: \_\_\_\_\_ Evening \_\_\_\_\_

Mobile: \_\_\_\_\_ Email Address: \_\_\_\_\_

National Insurance Number: \_\_\_\_\_

Do you require a permit/visa to work in the UK? Yes  No  (please tick as appropriate)

Do you hold a valid driving licence for a motor vehicle? Yes  No  (please tick as appropriate)

Details (including dates) of any endorsements or penalty points: \_\_\_\_\_

**Disclosure of Criminal Convictions**

You are required to disclose all criminal convictions including any which may be 'spent' under the Rehabilitation of Offenders Act 1974. This is because the post you are applying for is covered by the Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975 or 1986 and therefore even 'spent' convictions must be disclosed.

Any information you provide will be treated as strictly confidential. Disclosure of a criminal record does not automatically debar you from appointment but allows the College to make a decision about suitability taking into account only those offences which are relevant to the particular post you have applied for.

Have you ever been convicted of an offence or been subject to a bind-over caution?

Yes  No  (please tick as appropriate)

If yes please provide full details: \_\_\_\_\_  
 \_\_\_\_\_

Are you facing any criminal prosecutions? Yes  No  (please tick as appropriate)

If yes please provide full details: \_\_\_\_\_  
 \_\_\_\_\_

Have you ever been the subject of a County Court Judgement (CCJ)? Yes  No  (please tick as appropriate)

Successful candidates will be required to complete a disclosure which will enable the Disclosure and Barring Service (DBS) formerly known as CRB to carry out necessary checks with the Independent Safeguarding Authority and the Police. Failure to disclose convictions could result in the withdrawal of a job offer or disciplinary action.

### Disability

Kendal College is committed to 'Positive about Disabled People' and therefore guarantees an interview to people with a disability provided they meet the essential criteria for the post as identified in the person specification. For this reason you are asked to declare any disability:

### Declaration

Please declare here if you are related to any member of the College including the Corporation and if so please provide details:

### Referees

Please give the name, occupations and full addresses of two responsible persons to whom you are not related, and to whom reference can be made who can comment on your work skills. One referee where possible should be in a position to comment on your ability to work with children, young people and vulnerable adults. If you do not have current employment you may give the name of a tutor or professional adult who has known you for at least two years.

1.	Name:	_____	2.	_____
	Relationship/ Status	_____		_____
	Address	_____		_____
		_____		_____
	Telephone:	_____		_____
	E Mail:	_____		_____

Please indicate if the College can approach your referees without prior permission:

Referee 1: Yes  No  (please tick as appropriate)

Referee 2: Yes  No  (please tick as appropriate)

**Appointments will only be made subject to two references satisfactory to College.**

### Data Protection 1998

The information provided on this application form will remain private and confidential and will be used for the purpose of recruitment and selection. Where the applicant is successful Kendal College may wish to process this information for personnel administration and business management purposes. Please note that Kendal College may approach third parties to verify the information that you have given. By signing this form you will be providing Kendal College with your consent to all these uses.

Application No:

### Employment History

The College will normally take employment references from your last two employers. References will not be requested unless you have been offered and accepted an interview with us. Please let us know if this would be an issue for you.

Please give details of past and present work. This can be paid work, voluntary work or work at home or “unwaged” activities. **Start with the most recent**. Use additional A4 paper if required. For employment dates, please detail month and year and ensure that there are no gaps unaccounted for.

Name & Address of Employer	Job Title and Brief Description of Post	Final Salary	Contracted Hours	Reason for Leaving
Employment commenced:		Leaving Date:		
Employment commenced:		Leaving Date:		
Employment commenced:		Leaving Date:		
Employment commenced:		Leaving Date:		
Employment commenced:		Leaving Date:		
Employment commenced:		Leaving Date:		

Teaching posts only:

DfES/DCSF No: \_\_\_\_\_

QTLS No: \_\_\_\_\_

## Education, Qualifications and Professional Qualifications

Name and Address of Educational Establishment Attended	Full or Part-Time	Dates	Qualifications Obtained

## Additional Training

Include any short courses that you have undertaken in the past two years **if relevant** to your application. (Use additional A4 sheets if required). In the details column please give date, month and year along with name of course provider.

Course/Programme and Duration of Training	Details

Membership of Professional bodies:

If the role you are applying for requires you to drive, are you able to do this?

Yes  No  (please tick as appropriate)

Have you taken any parental leave with a previous employer? Yes  No  (please tick as appropriate)

If yes how long?: \_\_\_\_\_

## **Additional Information**

Please outline on this page why you have applied for this vacancy and how you match the criteria for the job (700 words Max). Please use additional A4 sheets should you need to.

## Other Information

	Yes	No
Have you ever been dismissed from employment for a reason other than redundancy?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been suspended or subject to disciplinary action in any post you have held?	<input type="checkbox"/>	<input type="checkbox"/>

If you have answered YES to either of the above, please specify on a separate, signed sheet.

	Yes	No
Do you have the right to live and work in the UK?	<input type="checkbox"/>	<input type="checkbox"/>
Do you require a work permit to take up employment in the UK?	<input type="checkbox"/>	<input type="checkbox"/>

### Declaration

I confirm that all the information I have provided as part of this application – including any letters or CV is accurate and true. I am in agreement with the information provided being processed for employment purposes as defined by the Data Protection Act. I also consent if my application has been completed on-line and I have been unable to sign.

**Signature:** ..... **Date:** .....

**Online Signature:**  By ticking this box you have created an electronic signature as legally binding as your hand-written signature

**Print Name:** .....

Please email back to: **Personnel@kendal.ac.uk**

Or post to:

**Personnel, Kendal College, Milnthorpe Road, Kendal, Cumbria LA9 5AY**

**Please note:** As a rule we do not acknowledge receipt of postal application forms. However, if you wish to receive acknowledgement of receipt of a postal application, please include a stamped, self addressed envelope.



## Equal Opportunities Monitoring Form

This form will be used to monitor how Kendal College compares nationally and locally with regard to equal opportunities. It will not be held for any other purpose. It does not constitute any part of the recruitment and selection process and although it will be kept on your personal file if you are appointed, it is used solely for the purposes of equal opportunities monitoring.

Name \_\_\_\_\_ Post applied for: \_\_\_\_\_

Gender – please specify: Male  Female  Transgender

### Disability

Do you have a disability as described under the Equality Act 2010\*?

Yes  No  (please tick as appropriate)

\* *The Act defines a disabled person as a person with a disability. A person has a disability for the purposes of the Act if he or she has a physical or mental impairment and the impairment has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities*

Do you consider yourself to have a disability?

Yes  No  I do not wish to disclose whether or not I have a disability  (please tick as appropriate)

If answering yes, please give details of your disability:

Please indicate the nature of your impairment by placing a cross in the appropriate box or boxes below:

<input type="checkbox"/>	<b>Physical Impairment</b> , such as difficulty using your arms, or mobility issues requiring you to use a wheelchair
<input type="checkbox"/>	<b>Sensory impairment</b> , such as being blind or having a serious visual impairment, or being deaf or having a serious hearing impairment
<input type="checkbox"/>	<b>Mental health condition</b> , such as depression or schizophrenia
<input type="checkbox"/>	<b>Learning disability or difficulty</b> , such as Down's Syndrome or dyslexia, or Cognitive impairment, such as autistic spectrum disorder
<input type="checkbox"/>	<b>Long-standing</b> or progressive illness or health condition, such as cancer, HIV infection, diabetes, epilepsy or chronic heart disease
<input type="checkbox"/>	<b>Other</b> (please specify)
<input type="checkbox"/>	
<input type="checkbox"/>	

### Ethnic Origin

I would describe my ethnic origin as (please tick in the appropriate box):

<input type="checkbox"/>	Asian or Asian British – Bangladeshi	<input type="checkbox"/>	Mixed – white or Black African
<input type="checkbox"/>	Asian or Asian British – Indian	<input type="checkbox"/>	Mixed – white or Black Caribbean
<input type="checkbox"/>	Asian or Asian British – Pakistani	<input type="checkbox"/>	Other mixed background
<input type="checkbox"/>	Asian or Asian British – any other Asian background	<input type="checkbox"/>	White British
<input type="checkbox"/>	Black or Black British – African	<input type="checkbox"/>	White Irish
<input type="checkbox"/>	Black or Black British – Caribbean	<input type="checkbox"/>	Other white background
<input type="checkbox"/>	Black or Black British – other black background	<input type="checkbox"/>	Any other
<input type="checkbox"/>	Chinese	<input type="checkbox"/>	Not known or not provided
<input type="checkbox"/>	Mixed - white or Asian		

These categories are used by the Office of National Statistics (ONS) 2001 Census and are the categories prescribed by the SFA.

Date of Birth \_\_\_\_\_

Please tell us where you saw this post advertised: \_\_\_\_\_ Date: \_\_\_\_\_