CONFIDENTIAL

Application for Teaching Appointment



This form should be typed or hand-written in black ink for photocopying purposes

Application for the post of			R	Ref No. R/									
at: (esta	blishm	nent)		С	Closing date								
Part A – Perso	onal D	etails											
Surname:					Previous surname(s):								
Forenames:					Known nan	ne:							
Title:					(if different from forename)								
Date of Birth:			Gender:		N.I.Number	r:							
Home Address	s:				Tel. No. Ho	me	:						
					Tel. No. Wo	ork:							
					Tel. No. Mo	obile							
Postcode:					DfES Ref. I	No.							
FOR OFFICE	USE C	NLY	_										
1. Treasurer's Nu	ımber		2. Ge	eneral Ledg	ger code			\perp			\bot		
3. Date of comm	enceme	nt			4. Grade Des	scrip	tion / (Code					
5. Contract statu	s: - PEF	RMANENT /	TEMPORA	ARY* (dele	ete as appropri	ate)							
* If temporary	/:- a) St	ate employn	nent cease	date									
	•				ment (see cod	le lis	t) [
					r		-		<u>—</u>	HR	TOT	AL MIN:	S
6. Session hours	per we	ek (if full time	e teacher q	uote F/T) .								IVIII	
Week 1		FROM	AM	то	FROM	ΡM	I TO)		HRS	3	MIN	IS
MONDAY	1												
TUESDAY	2												
WEDNESDAY	3												
THURSDAY	4												
FRIDAY	5												
Week 2 MONDAY	6										$\overline{}$		\neg
TUESDAY	7												\dashv
WEDNESDAY	8			_		-+			-+				-
THURSDAY	9	+		_		-+							\dashv
FRIDAY	10												\dashv
		nedical quest	tionnaire) s	ent to Occ	upational Heal	th De	epartm	nent.					
8. Will this pers	on requ	ire an SCC e	email acco	unt? YES	/ NO								
9. CERTIFIED	CORRE												
		AUTHOR	RISED OFF	ICER SIGI	NATURE			DA	.1E				_
Please tick to in	ndicate	that you ha	ve enclos	ed the rele	evant forms, P	P45	P	46	F	PRF 7	048		
References	Dis	closure Clea	arance Ap	plication I	Form and Veri	ificat	tion of	f Ider	ntifica	ation			

Notes for candidates

- 1. All sections of the application form must be completed. The application must then be forwarded to the School or Education Department, as specified in the advertisement, for processing.
- 2. Additional information, which you consider relevant, may be submitted on a separate sheet if there is insufficient space on the form. Please do not glue/attach information to the form as it makes it difficult to photocopy.
- You are welcome to attach a letter in support of your application but, unless requested otherwise in the advertisement or job details, you are asked **not** to send curriculum vitae, testimonials or other documents.
- 4. The information supplied by you on this form will be used for recruitment and selection purposes only. The Local Authority (LA) undertakes that if it needs to use the information for any other purpose, it will not do so without having first obtained your consent.
- 5. The LA has a duty to ensure the fitness of all employees to carry out the duties for which they are employed. You may be required to complete a confidential health declaration form and, if so, the offer of employment will be subject to receipt of a satisfactory medical report. In some cases a medical examination may be necessary before an appointment can be confirmed.
- 6. All external successful applicants will be asked to confirm, in advance of taking up the appointment, that they are eligible to work in the United Kingdom. In order to establish this, the successful applicant will be asked to provide documentation showing their National Insurance Number or provide copies of Tax Forms P45 or P60, or provide other evidence of their entitlement to work in the UK.
- 7. This post requires a criminal background check via the Disclosure Procedure.
- 8. Spent Criminal Convictions: The post for which you are applying is exempt from Section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act (Exemptions) Order 1975 which requires you to reveal <u>any</u> information concerning spent or unspent convictions, cautions, reprimands or warnings. Failure to disclose information concerning such convictions in your application for this post may lead to dismissal or disciplinary action by Governors or LA. Any information given will be treated in strict confidence and will be considered only in relation to your application for this post.
- 9. Somerset County Council strives to ensure that no employee or job applicant receives less favourable treatment than another on the grounds of age, disability, ethnic or national origin, gender, marital status, religion, sexual orientation or political belief.
- 10. Canvassing the support of Members of Somerset County Council or Senior Officers of the Council may lead to the disqualification of a candidate's application.
- 11. The Governors of Voluntary Aided Schools, as the employers of the "staffing complement", will have regard to this policy insofar as it is consistent with the character of the School's Foundation and its Trust Deed.
- 12. Candidates called for interview will be reimbursed reasonable travelling and subsistence expenses as soon as possible after the interview

The successful candidate will be reimbursed his/her expenses with the first month's salary after taking up the appointment.

If a candidate declines an appointment if it is offered, no expenses will be paid unless the Governors or the Authority decides that there are extenuating circumstances.

Part B - Education and Training

Please provide information about post -16 education and training you have received in this country or abroad and include all qualifications obtained, including degrees, with class and division and Teaching Certificates. Please present this information in reverse date order.

Establishment	Full or part- Time	Subjects studied examinations tal	/ ken	Qualification of	btained	Dates attended
Types of teacher tra	nining:					
Early Years □	Primary		Middle □		Secondar	у 🗆
Further Education [□ Special		Other \square			

Part C - Previous Appointments (other than teaching)
Please provide information, in reverse date order, on any other experience including raising a family and voluntary work.

Name and address of employer/organisation	Dates of employment	Job title and description

Part D - Teaching Experience
Please give details of all previous teaching experience in reverse date order, beginning with your current post.

Local Education Authority or employer, name and size of school (Number on roll)	Age range taught	Dates of employment	Status / curriculum / responsibilities / subjects	Salary, scale point and allowances
Current post				
Previous posts				

Part E - In-Service Training

Please give details of any In Service Training/Professional Development courses attended, of 3 days or more, within the last 5 years, which you consider relevant to this post, in reverse date order.

Organising body/ provider	Course title/theme	Year	Duration	If assessed, indicate result

Part F - Personal interests and hobbies	(include positions of responsibility)
	lying for the position of your personality, abilities, skills, aptitudes, experience and essary.) Alternatively, you may wish to include this

Part H - References

References may be taken up prior to interview. If you do not wish your present employer to be contacted prior to interview please tick this box. Please give the names of two referees. Applicants for a post in a Catholic school, or a headship or deputy headship post in a C of E Voluntary Aided School are encouraged to also give the name of a clerical referee. Unless you are seeking your first appointment, you should quote your present or most recent headteacher or equivalent person. At least one of your referees must be able to comment on your teaching abilities.							
Referee 1							
Name							
Occupation							
Address							
Postcode							
Daytime tel. no.							
Position / Relationship to you.							
Referee 2							
Name							
Occupation							
Address							
Postcode							
Daytime tel. no.							
Position / Relationship to you.							
Clerical referee (e.g. parish pri	iest, minister)						
Name							
Occupation							
Address							
Postcode							
Daytime tel. no.							
Position / Relationship to you.							

Part I - Administrative Information a) If you have previously worked as a part-time or supply teacher, have you elected with the DfES (Teachers' Pensions) to pay superannuation on your Yes □ No □ part-time earnings? b) If you have elected, please give date c) Have you previously opted out of the Teachers' Pension Scheme? Yes □ No □ d) If you have opted out, please give date e) Are you a member of another pension scheme? Yes □ No □ f) If yes, please specify the name of the pension scheme. Yes □ No □ Do you consider yourself to have a disability? If yes, would the provision of any aids or modification assist you in carrying out the duties of the post? Is there anything we need to know about your disability in order to offer you a fair selection interview? Part J - Declarations **General Teaching Council** Yes □ No □ Are you recognised as a qualified teacher? No □ If not, are you eligible for recognition? Yes □ Are you registered with the GTC? Yes □ No □ Please contact the GTC for information about registration or general enquiries call 0870 001 0308 or visit the website at http://www.gtce.org.uk/ **Probation Period** Have you successfully completed a period of probation? Yes □ No □ **Spent Convictions** Do you have any spent or unspent convictions, cautions, reprimands or warnings? Yes □ No □ If **yes** please provide details on a separate sheet and enclose in a separate sealed envelope with your application (if applying online please print out application form and submit by post). Failure to disclose information may lead to dismissal or disciplinary action by the Authority. Any information given will be treated in the strictest confidence and will be considered only in relation to your application to this post. **Declaration** I certify that, to the best of my knowledge, the details provided by me on this application form are correct. I understand that if I have undertaken any form of canvassing or have knowingly given false information on this form or to the Selection Panel, I may disqualify myself from appointment or, having taken up appointment, may render myself liable to disciplinary action not excluding my dismissal.

If you apply online and are shortlisted, you will be asked to sign your application at interview.

DATE

SIGNATURE

Further Education Qualification Verification Consent Form



Newly Qualified Teachers Only_

An increasing number of universities and further education establishments are requesting written consent from their former students in order to release details to employing LEAs to confirm that the required qualifications have been awarded. Therefore you are asked to complete the form below and sign and date the form to enable Somerset County Council to request this information on your behalf.

Part A (Perso	nal Det	ails)							
Title			Full Nam	ne					
Previous Surr	name		Date Of	Date Of Birth		DfES I	No.		
Part B (Detail	s of Stu	ıdy)				•	<u>'</u>		
University, Co	llege or	Institution	attended						
Period of stud	у		to				Full/Part	time	
Part C (Qualit	fication	Details)							
Title of qualific		,				Pass/Hor	ns		
Date of award						Class/div	rision		
Main subjects (principal first)									
Awarding body	y								
Please continu	ue for ac	ditional qu	ualifications						
Title of qualific	ation					Pass/Hor	ns		
Date of award						Class/div	rision		
Main subjects (principal first)									
Awarding body	y								
Please Indicat	e which	of the QT	S tests you ha	ave pa	assed:				
Literacy □			Numeracy □			IC	CT 🗆		
Declaration									
I confirm that t verify this with		_		urate :	and au	thorise So	omerset (County (Council to
Signature						Date			
If you apply or	nline and	d are short	tlisted, you wi	ll be a	sked to	sign you	ır applica	tion at i	nterview.

Confidential

Equal Opportunities-Recruitment Monitoring

This form will be kept separate from your application form. It is not referred to during the selection process.

Somerset County Council values diversity and is committed to promoting equality of opportunity for our employees and job applicants.

We monitor our recruitment and selection practices to fulfil our statutory duty relevant to equality in employment and to ensure our practices are fair, equitable and consistent with the aim of appointing the best person for the job. Recruitment monitoring enables us to take active steps to promote better policy and organisational practice, making Somerset County Council a great place to work

The information you supply on this questionnaire will be recorded confidentially on our HR Systems and held for a maximum of 12 months. During this time it will be used solely for the purposes of monitoring the profile of our job applicants. Access to the data will be restricted to nominated staff within the HR Service.

If you are appointed, the data will also be used for our HR/Payroll records purposes, which includes another legal requirement, workforce monitoring. We aim to ensure all applicants and employees, regardless of circumstances or status, receive equal access to opportunity and fair treatment.

For these reasons it is important that you complete the recruitment monitoring questionnaire in addition to the application form. Once completed, the questionnaire should be returned with your application to the Recruitment Administrator, the address of which is detailed in the Recruitment Information Pack.

Thank you for your co-operation.

EQUAL OPPORTUNITIES - RECRUITMENT MONITORING

This information will be treated in the strictest confidence.

*Please tick * the appropriate box*

Name:	Job Ref:
Are you? Male □ Female □]
What is your date of birth (dd/mm/y	y)?
To which of these groups do you co	nsider you belong to?
White	Asian or Asian British
□ British □ Other	☐ Indian ☐ Bangladeshi
□ Irish	□ Pakistani □ Other
Mixed	Black or Black British
☐ White & Black ☐ White & Asian Caribbean	□ African □ Caribbean
☐ White & Black African ☐ Other	☐ Other
Other Background	
☐ Chinese ☐ Gypsy ☐ Other	
If you have ticked other to any of th	e above, please specify:
defined as having 'a physical or me adverse effect on his or her ability to definition includes people who have It does not necessarily mean that the very clear we have provided some exhaustive. You may consider that, had hearing loss, dyslexia arthritis, If yes, please indicate the nature	ation Act 1995, a person with a disability is notal impairment which has a substantial and long term o carry out normal day to day activities'. Since 2005 the been diagnosed with HIV, cancer and MS. his affects how you do your work. As the definition is not examples of the impairments covered. The list is not for example, you have, for a period of a year or more diabetes, asthma, epilepsy or you are partially sighted.
Mobility Impairment ☐ Visual □	Impairment □ More than one Impairment □
 Hearing Impairment □ Learni	ng Disability □

Are currently employed by SCC? Yes □ No □									
If yes, please answer the two questions below in respect of your <u>main</u> contract. If SCC does not currently employ you, there are no further questions for you to complete.									
Is your <u>main</u> contract (tick or	ne box on	ly):							
Permanent? ☐ Fixed term? ☐	Casual/	Relief/Supply? □							
Which Directorate do you cu	rrently wo	ork in?							
Chief Executive's Office		Community							
Resources (including Somerset Staffing)		Fire & Rescue □							
Children & Young People (Non School)		Children & Young □ People (Schools)							
Environment (excluding Fire & Rescue)									
Is the position you are applyi	ng for a p	promotion / grade increase?							
Yes □ No □									
Thank you for your co-operation. Please return the completed questionnaire with your application form.									
Version: April 06									