

All sections must be completed using black ink or type. Your application will be considered only if you complete all the relevant sections of this form. If you need more space please attach a separate sheet(s). Please write the job reference and job title on each additional sheet.

#### **EQUAL OPPORTUNITIES STATEMENT**

Sunnyside Academy will afford equal opportunity in all aspects of employment, irrespective of age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, marriage and civil partnership.

#### **DECLARATION**

By submitting this application I am agreeing that the information given is true and correct and I understand that any offer of employment will be made on this basis. I understand that trying to influence employees, or Governors of the school, in connection with this application, will disqualify me. I understand that in line with legislation, if the job for which I am applying will have access to children or vulnerable adults or is a designated job within the meaning of Criminal Records Bureau (CRB) legislation, I agree to being checked by the CRB to disclose any criminal record I have. I understand that in line with legislation I will be required to provide evidence of my eligibility to work in the UK.

| JOB TITLE:   |                      |  |  | REF NO    | •         |  |
|--|----------------------|--|--|-----------|-----------|--|
| 000  |                      |  |  | 1121 110  | -         |  |
| PERSONAL (Please complete in BLOCK CAPITALS)   |                      |  |  |           |           |  |
| Title:   | Surname/Family Name: |  |  |           |           |  |
| Please give any previous names (including surnames) by which you have been known:                |                      |  |  |           |           |  |
| First Name:  |                      |  |  |           |           |  |
| Address:   |                      |  |  |           |           |  |
| Postcode:  |                      |  |  |           |           |  |
| Telephone (Daytime): (Evening): (Mobile):  |                      |  |  | (Mobile): |           |  |
| May we contact you at work? Yes No E-mail Address:   |                      |  |  |           |           |  |
| Please mark this box to confirm you are happy for us to communicate with you using this address: |                      |  |  |           |           |  |
| If not please provide an alternative address:  |                      |  |  |           |           |  |
| National Insurance Number:   |                      |  |  |           |           |  |
| Do you want to work full-time only?  |                      |  |  |           |           |  |
| Would you like us to consider you for other working patterns, for example,                       |                      |  |  |           |           |  |
| Job share, part time, working in term-time only and so on?                                       |                      |  |  |           | Yes No No |  |
| If yes, please specify:  |                      |  |  |           |           |  |



### **CURRENT OR LAST EMPLOYER**

If you are applying for this job with no previous experience, please put "N/A" in this part of the application form.

| <b>Employers Name:</b>                   |                 | Job Title: |           |  |  |
|--|-----------------|------------|-----------|--|--|
| Address:                                 |                 |            |           |  |  |
| Post Code:                               | Date Appointed: |            | Salary: £ |  |  |
| Notice Period:                           | Date Left:      |            |           |  |  |
| Reason for Leaving:                      |                 |            |           |  |  |
| Brief description of duties and response | onsibilities:   |            |           |  |  |
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<u>CAREER HISTORY</u> – Please account for any gaps in employment, training or education dates. If you are applying for this job with no previous experience, please put "N/A" in this part of the application form.

| Name and address of                | Position held and brief description | Da   | tes |                    |  |
|------------------------------------|-------------------------------------|------|-----|--------------------|--|
| employer(s) (Show<br>latest first) | of duties                           | From | То  | Reason for leaving |  |
|                                    |                                     |      |     |                    |  |
|                                    |                                     |      |     |                    |  |
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| EDUCATION   | Da           | ates         | 0 1:0 1: 10 1:                                     | T             |            | Date          |
|---|--------------|--------------|--|---------------|------------|---------------|
| Place you studied at From                         |              | То           | - Qualification/Subject                            | Level         | Grade      | achieve       |
|   |              |              |  |               |            |               |
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| HIGHER EDUCATION                                  |              |              |  |               |            |               |
| HIGHER EDUCATION                                  | Da           | ntes         |  |               |            | Data          |
| Place you studied at                              |              |              | Qualification/Subject                              | Level         | Grade      | Date achieved |
|   | From         | То           |  |               |            | demeved       |
|   |              |              |  |               |            |               |
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|   |              |              |  | <u> </u>      |            |               |
|   |              |              | <b>5</b> – Please list any profession              | al organis    | ation of v | vhich you     |
| are a member which are rel                        |              |              | Status/Leve  | l of momb     | orchin     |               |
| Professional Organisation                         |              |              | Status/ Leve                                       | i oi illellik | Jersnip    |               |
|   |              |              |  |               |            |               |
|   |              |              |  |               |            |               |
|   |              |              |  |               |            |               |
| If you are applying for a tea                     | ching job, p | lease confir | m you are qualified to teach                       | in Englan     | d and Wa   | les and       |
| that you are registered to d                      |              |              | Teacher Registration Number                        | -             | are apply  | ing for a     |
|   |              |              |  |               |            |               |
| job as a social worker, pleas<br>Teacher Registra |              |              | ocial Care Council Reference General Social Care C |               |            |               |



#### CONTINUING PROFESSIONAL DEVELOPMENT AND OTHER TRAINING COURSES

| continuing professional development undertaken relevant to the role for which you are applying.  |
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| SKILLS, KNOWLEDGE AND EXPERIENCE   |
| Using the person specification as a guide, please tell us how you feel your skills, knowledge and experience   |
| are relevant to this job. Remember to include any experience you have gained in community or voluntary   |
| work as well as employment. Please continue on a separate sheet if necessary.  It is important to complete this section. Simply referring to a curriculum vitae is not acceptable. |
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### **OTHER DETAILS**

| criteria in the person specification for the job.  | eet all the es | ssential |
|--|----------------|----------|
| Under the Equality Act 2010 a person is disabled if they have a physical or mental impaisubstantial and long-term adverse effect on their ability to carry out normal day-to-day |                | n has a  |
| Do you consider yourself to have a disability under the Equality Act 2010 and wish to claim this guaranteed interview?   | Yes            | No 🗌     |
| Do you have a relationship with an employee or Governor within the acadamy?  | Yes            | No 🗌     |
| NOTE: Please note canvassing of employees and Governors of the academy directly or i connection with this application will disqualify you.                                       | ndirectly in   |          |
| If YES, please state the person's name, position/job title and relationship:   |                |          |
| Do you hold a UK Driving Licence? Yes / No If Yes, please specify the type (Full, HGV, etc   | c.):           |          |
| As part of the recruitment process you will be required to provide evidence of your elig UK:   | ibility to wor | k in the |
| Are you eligible to work in the UK?  | Yes            | No 🗌     |
| Do you receive an occupational pension from the Local Government Pension Scheme?   | Yes 🗌          | No 🗌     |



#### **REFERENCES**

Please provide two references, one of which should be from your present or most recent employer. As this post requires a CRB disclosure we will take up these references before we interview you. If you do not provide full contact details, including contact telephone numbers, for your referees, this may delay the recruitment/appointment process. If you have not worked previously, please name someone as a referee who has known you for at least three years but is not a relative.

| Reference 1   |                     |                     |                                      |  |  |
|---|---------------------|---------------------|--------------------------------------|--|--|
| Name:   |                     | Job Title:          |                                      |  |  |
| Organisation:   |                     |                     |                                      |  |  |
| Address:  |                     |                     |                                      |  |  |
| Postcode:   |                     |                     |                                      |  |  |
| Email:  | Telephone:          |                     | Fax:                                 |  |  |
| Relationship to you:  |                     |                     |                                      |  |  |
|   |                     |                     |                                      |  |  |
| Reference 2   |                     |                     |                                      |  |  |
|   |                     | I                   |                                      |  |  |
| Name:   |                     | Job Title:          |                                      |  |  |
| Organisation:   |                     |                     |                                      |  |  |
| Address:  |                     |                     |                                      |  |  |
| Postcode:   | I                   |                     |                                      |  |  |
| Email:  | Telephone:          |                     | Fax:                                 |  |  |
| Relationship to you:  |                     |                     |                                      |  |  |
|   |                     |                     |                                      |  |  |
| Data Protection Statement:  | 1.1                 |                     |                                      |  |  |
| The information you give on this for  |                     |                     | _                                    |  |  |
| recruitment monitoring purposes. If you are appointed to the job your name and address will be given to the recognised trade unions, who may contact you with membership information. Please tick this box if |                     |                     |                                      |  |  |
| ,   |                     | ·—                  | ormation. Please tick this box if    |  |  |
| you <b>do not</b> want your information t   | to be passed to the | trade unions        |                                      |  |  |
| IMPORTANT Places read and com   | valoto the coetion. | Dobobilitation of   | Offenders Disclosures on             |  |  |
| IMPORTANT - Please read and com<br>Page 7 and make certain you have   | •                   |                     | •                                    |  |  |
| dating below.   | completed all oth   | er relevant section | is of this form prior to signing and |  |  |
| dating below.   |                     |                     |                                      |  |  |
| By submitting this application Lam  | agreeing that the i | nformation given i  | s true and correct and Lunderstand   |  |  |
| By submitting this application I am agreeing that the information given is true and correct and I understand that any offer of employment will be made on this basis.   |                     |                     |                                      |  |  |
| and any one. or employment will b   | 2 3                 |                     |                                      |  |  |
| Signed:   |                     | Date:               |                                      |  |  |

Please return the application form as instructed in the details of the advert for the job or to the address supplied with the application information.



#### REHABILITATION OF OFFENDERS ACT – DISCLOSURE OF PREVIOUS CONVICTIONS

Before completing this section please read the Guidance for Applicants which includes information on the Rehabilitation of Offenders Act and the school's Safeguarding and CRB Policy.

As an Equal Opportunities employer Sunnyside Primary School will not unfairly discriminate against you if you declare that you have a criminal record. Criminal records are only taken into account when the conviction may be relevant to the job for which you are applying.

This post is exempt from the Rehabilitation of Offenders Act 1974, so you must tell us about any convictions, cautions or final warnings you may have in the Convictions Section of this form, even if they are considered to be 'spent' under this Act.

We will keep in strict confidence any information we receive from the Criminal Records Bureau. We will store it securely during the recruitment and selection process.

A criminal record will not necessarily affect your chances for a post unless it makes you unsuitable for appointment. In making this decision we will consider the nature of the offence, how long ago

| and what age you were when you committed the offence, and any other relevant factor        | s, including |      |
|--|--------------|------|
| the school's Safeguarding and CRB policy and procedures.                                   |              |      |
| Do you have any spent/unspent convictions?   | Yes          | No 🔙 |
| If YES, please give the details of the offence, date of conviction, judgement/sentence and | d any other  |      |
| additional information in the section below.   |              |      |
| DICCLOSURE OF DEFINALIC CONTRACTIONS   |              |      |

#### **DISCLOSURE OF PREVIOUS CONVICTIONS**

Before completing this section please read the Guidance for Applicants which includes information on the Rehabilitation of Offenders Act and the school's Safeguarding and CRB Policy.

| Details of Offence     | Date of Conviction | Sentence/Judgement |
|------------------------|--------------------|--------------------|
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| Additional Information |                    |                    |
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Important: This page should be detached from your application form and placed in a sealed envelope marked 'Private and Confidential' and 'For the attention of: Chair of Recruitment Panel'. Name (Please Print): Reference No (For internal use only)

| Sign: |  |
|-------|--|
| Date: |  |