



The Thomas Aveling School

(A Foundation Technology College)
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APPLICATION FORM for all Teaching Posts

CONFIDENTIAL Please complete this form in **BLACK INK** or **TYPE**

Post Applied for:

PERSONAL DETAILS

SURNAME: PREFERRED TITLE: PREVIOUS NAMES:

FIRST NAMES: E-MAIL:

CONTACT ADDRESS:

DfCSF REF NO:/..... GTC REGISTERED: Yes/No HOME TELEPHONE NO:

NATIONAL INSURANCE NO: WORK TELEPHONE NO:

EDUCATION & TRAINING

(A) TRAINING AS A TEACHER
 NAME OF TEACHER TRAINING INSTITUTION:

FROM:	Month	Year	TO:	Month	Year	QUALIFICATION OBTAINED
	/			/		

SUBJECTS, MAIN AND SUBSIDIARY:

AGE RANGE OF PUPILS:

OTHER SPECIAL INTERESTS:

(B) UNIVERSITY, COLLEGE, OTHER INSTITUTIONS (other than initial teacher training). Give dates and state whether full-time of part-time courses

NAME OF INSTITUTION	FROM:	Month / Year	TO:	Month / Year	QUALIFICATION OBTAINED
1. / /
2.					

P.T. / F.T. COURSE	SUBJECTS (Main and subsidiary)	HONS (with class) OR PASS GRADE	DATE OF AWARD
Degree / Diploma / Title			
1.
2.			

(C) SECONDARY EDUCATION

NAME OF INSTITUTION (give dates):

1.

2.

ACADEMIC QUALIFICATIONS (Give Subjects, Grades and Dates)

GCE 'O' LEVEL, GCSE (or equivalent)

.....

'A' LEVEL etc.

CAREER HISTORY

PLEASE GIVE DETAILS OF ALL FULL AND PART-TIME WORK, INCLUDING PARTICULARS OF ALL PAID AND UNPAID EMPLOYMENT OR EXPERIENCE AFTER THE AGE OF 18, eg. COMMERCIAL EXPERIENCE, RAISING FAMILY, YOUTH WORK, VOLUNTARY WORK. COMPLETE THE COLUMNS WORKING BACKWARDS FROM PRESENT DATE. **PLEASE LEAVE NO GAPS**

DATES				EMPLOYER ADDRESS SCHOOL NAME AND ADDRESS TYPE OF BUSINESS OR ACTIVITY PLEASE STATE <u>JOB TITLE</u>	AGE RANGE	APPROX. SCHOOL ROLL	SALARY SCALE/ incl respons ibility pts	F/T P/T prop	REASON FOR LEAVING
FROM		TO							
M	Y	M	Y						

Continue on a separate sheet if necessary. Put your full name on individual sheets

IN - SERVICE TRAINING & DEVELOPMENT

Give details of relevant courses and training undertaken in the last five years			
DATES AND DURATION	TITLE OF COURSE/TRAINING (include Home Study and Distance Learning)	NAME OF PROVIDER Eg. LA, College etc.	QUALIFICATION OBTAINED (if any)

APPLICANT STATEMENT

Pick out those aspects of your experience or skills that are **RELEVANT** to this post. Explain how your ability, skills and knowledge match those required for the appointment, where set out, in the person specification. Remember to consider experience in previous employment and relevant experience outside of paid work, such as that gained at home, in the community or through voluntary/leisure/college activities, and to tell us if you have special requirements to attend for the selection process, eg. wheelchair access. Give examples where you can in support of your application.

Continue on a separate sheet if necessary. Put your full name on additional sheets.

If you include a CV, ensure its relevance to this appointment.

REFERENCES

Please give the names and addresses of two referees who can be consulted regarding your professional ability for the post. One of the referees **MUST** be your present or most recent employer. If not, we reserve the right to request one. Students should include their college Principal. References will be taken up before an offer of employment is made. These may be requested before interviews.

1. NAME: (Including Title, i.e. Mr/Mrs/Ms)

POSITION:

ADDRESS:

.....

TEL NO: FAX NO: E-Mail:

2. NAME: (Including Title, i.e. Mr/Mrs/Ms)

POSITION:

ADDRESS:

.....

TEL NO: FAX NO: E-Mail:

PROTECTION OF CHILDREN

The Thomas Aveling School is committed to safeguarding the welfare of all students and all offers of employment will be subject to completion of an enhanced CRB Application and satisfactory disclosure/ISA registration when applicable.

DISCLOSURE OF CRIMINAL BACKGROUND OF THOSE WITH SUBSTANTIAL ACCESS TO CHILDREN IS REQUIRED: HAVE YOU EVER RECEIVED A REPRIMAND, FORMAL WARNING, CAUTION OR BEEN CONVICTED OF A CRIMINAL OFFENCE?

Please answer YES or NO in the box

Answering YES does not necessarily ban you from appointment. If YES, you are required to give details as this post, for which you are applying, is exempt from the provision of Section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975 (as amended).

CRIMINAL CONVICTIONS / CAUTIONS / REPRIMANDS / FORMAL WARNINGS

DATE	OFFENCE	SENTENCE

HEALTH DECLARATION

How much sick leave have you had in the past five years? Please give details of this and a brief declaration about current state of health, mentioning anything which may prevent you from carrying out the duties of the post:

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.....

All appointments are subject to completion of a Pre-Employment Health Questionnaire/Independent Health Assessment to confirm the applicant's fitness to undertake the post offered.

SUPERANNUATION SCHEME

Do you contribute to the Teacher's Superannuation Scheme? YES NO

If you contribute to another scheme, give details:

.....

.....

Have you elected to pay Superannuation contributions for part-time teaching? YES NO

DISCLOSURE OF RELATIONSHIP

Are you related by marriage, blood or as a co-habitee to any elected Member of the Governing Body of the School? YES NO

If YES, please state the name, relationship and position held

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DECLARATION

I DECLARE THAT THE INFORMATION I HAVE GIVEN IN SUPPORT OF MY APPLICATION IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE AND COMPLETE. I UNDERSTAND THAT IF IT IS SUBSEQUENTLY DISCOVERED THAT ANY STATEMENT IS FALSE OR MISLEADING, OR THAT I HAVE WITH-HELD RELEVANT INFORMATION OR CONVASED MY APPLICATION, IT MAY LEAD TO DISQUALIFICATION OR, IF I HAVE BEEN APPOINTED, I MAY BE DISMISSED.

SIGNATURE: DATE:

EQUAL OPPORTUNITY MONITORING FORM

To help us ensure that our recruitment procedures give genuine equality of opportunity please answer the questions below. This document will be kept separate from your application (please tick box where appropriate).

VACANCY INFORMATION

Job Title:

Closing date:

PERSONAL INFORMATION

Name:

D.O.B

GENDER

Male

Female

ETHNIC ORIGIN

Please tick the box which most closely describes your cultural background

WHITE

British

Irish

Any other White background (please specify)

MULTI ETHNIC

Black Caribbean and White

Black African and White

Asian and White

Any other multi ethnic background

ASIAN OR ASIAN BRITISH

Indian

Pakistani

Bangladeshi

Any other Asian background

BLACK OR BLACK BRITISH

Caribbean

African

Any other Black background

CHINESE OR OTHER ETHNIC GROUP

Chinese

Any other ethnic group

DISABILITY

Do you have a disability in respect of employment in this post?

Yes

No

Please describe any special adaptations or arrangements you may require to undertake the duties of the post. These can be discussed with you at interview:-

ADDITIONAL INFORMATION

Are you applying as part of a Job Share:

Yes

No

Where did you see the advertisement for this position?

REHABILITATION OF OFFENDERS ACT 1974

We ask for details of any unspent criminal convictions you may have. If you have an unspent criminal conviction we will look at it in relation to the job you have applied for before making a decision. We will treat it in the strictest confidence. Failure to disclose any 'unspent' or 'spent' (if relevant) convictions may result in the offer of employment being withdrawn. If already appointed, you could be dismissed without notice.

There are specific job categories which are exempt under the provisions of the Act. This means that you must declare 'spent' or 'unspent' convictions for work in these categories. If you are applying for a job in any of the following categories, you MUST disclose all details of any caution or criminal offence.

- Work involving access to children, for example, school based staff, Youth Service etc.
- Work involving the provision of services to persons under the age of 18 which includes social services, care, leisure and recreational facilities and the provision of accommodation
- Work involving the provision of social services to persons:
 - over the age of 65
 - suffering from serious illness or mental disability of any description
 - addicted to alcohol or drugs
 - who have a sensory impairment
 - who are substantially and permanently disabled by illness, injury or congenital deformity

Any information you give will be strictly confidential.

Rehabilitation Periods

The following sentences are deemed as never being 'spent' and MUST be declared:

- imprisonment for life;
- imprisonment, youth custody, detention in a young offender institution, or corrective training for a term exceeding 30 months;
- preventive detention;
- detention during Her Majesty's pleasure or for life or under Section 205(2) or (3) of the Criminal Procedure (Scotland) Act 1975, or for a term exceeding 30 months passed under Section 53 of the Children and Young Persons Act 1993 (young offenders convicted of grave crimes), or under the Act of 1975 (detention of children convicted on indictment), or a corresponding court martial punishment;
- custody for life

The following list includes sentences which are subject to rehabilitation under the Rehabilitation of Offenders Act :

For a sentence of imprisonment, or youth custody or detention in a young offenders' institution, or corrective training for a term exceeding 6 months but not exceeding 30 months	10 years
For a sentence of imprisonment, or youth custody or detention in a young offenders' institution, or corrective training for a term not exceeding 6 months	7 years
For a sentence of imprisonment of 6 months or less	7 years
For a sentence of Borstal training	7 years
For a fine or other sentence (eg. a community service order) for which no other rehabilitation period is prescribed	5 years
For an absolute discharge	6 months
For a probation order, conditional discharge or bind over, and for fit person orders, supervision orders or care orders under the Children and Young Person Acts (and their equivalents in Scotland)	1 year, or until the order expires (whichever is the longer)
For detention by direction of the Home Secretary: From 6 months to 2.5 years	5 years
For 6 months or less	3 years
For a detention centre order not exceeding 6 months	3 years
For a remand home order, an approved school order, or an attendance order	The period of the order and a further year after the order expires
For a hospital order under the Mental Health Acts	The period of the order plus a further two years after the order expires or five years from the date of conviction, whichever is the longer
<i>The following rehabilitation periods are for specific types of military punishment, with these rehabilitation periods being halved for offenders under the age of 17 at conviction</i>	
For cashiering, discharge with ignominy or dismissal with disgrace	10 years
For simple dismissal from the service	7 years
For detention	5 years