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| **CONFIDENTIAL** |  |  |
|  | St. Michael’s School, Harts Lane, Burghclere, RG20 9JWTel: (01635) 278137 headofsecondary@sanctusmichael.com   |

**Application for Employment**

This form has been designed to allow for electronic completion and emailed to the address above. Please feel free to expand boxes as required. You are not, however, permitted to change any headings within the document. Please complete all parts in black typeset. Please refer to the Guidance Notes when completing your application.

**By applying to work with children or vulnerable adults within the school, you are confirming that you are not barred from working with vulnerable groups. If this is not the case, you are committing a criminal offence.**

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| Post Applied For: **Pastoral Assistant** |  | Salary Range: |

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|  |  |  | Office use only |
|  | Date received |  |
| Short listed |  |

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| **Personal Details** |
| Title | Full name: |
| Present address | All previous names: |
| Home phone no.: |
| Mobile or work no.: |
| National Insurance no.: |
| Teacher Reference no. (if applicable): |
| E-mail address | Where did you see this post advertised? |

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| **Current Employment**  |
| Name and address of current employer | Job Title  |
| Current salary | Type of school |
| Date appointed | Date available |
| Responsibilities |

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| **Previous Employment** Please account for any gaps in employment. |
| Name & address of employer | Date from | Date to |
| Job Title  | Salary |
| Responsibilities | Reason for leaving |

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| Name & address of employer | Date from | Date to |
| Job Title  | Salary |
| Responsibilities | Reason for leaving |

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| Name & address of employer | Date from | Date to |
| Job Title  | Salary |
| Responsibilities | Reason for leaving |

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| Name & address of employer | Date from | Date to |
| Job Title  | Salary |
| Responsibilities | Reason for leaving |

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| **Professional Qualifications**  |
| Name of Establishment | FT or PT | Qualification  | Grade | Date |
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| **Education**  |
| Name of Establishment | FT or PT | Qualification | Grade | Date |
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| **Membership of Professional Bodies**  |
| Name of professional body | Type of membership | Registration reference | Renewal date (if applicable) |
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| **Training** Please include details of professional or personal development.  |
| Name of course | Organising body | Brief description of course content | Date |
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| **Statement in support of your application** |
| **Please refer closely to the job description and person specification in this section**. Successful candidates will be able to demonstrate how they meet the person specification for this role and show the impact of examples provided. Candidates should seek to provide a cogent and concise response of up to two sides of A4. Please use this application form and expand the box as required, rather than a separate document. |

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| **References** |
| Please refer to the Guidance Notes section on References before completing this section |
| Full name | Full name |
| Title | Title |
| Address | Address |
| Telephone no. | Telephone no. |
| Email address | Email address |
| Have you ever been known by any other names? If yes, please give full details here: |

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| **Miscellaneous Information** |
| Are you related to or the partner of any school governor or member of staff? **Yes / No**If yes, please give details. Such a disclosure will not disqualify you from consideration. However, the failure to declare such a relationship may disqualify you or may be dealt with under the appropriate procedure which may include the Disciplinary Procedure. |

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| **Disclosure of criminal convictions and Rehabilitation of Offenders Act 1974** |
| The appointment of any member of staff who may have contact with, or access to children or vulnerable adults will be subject to the receipt of a satisfactory disclosure from the Disclosure and Barring Service. Please make the following declaration and tick the appropriate box: |

|  |  |
| --- | --- |
|  | I have nothing to declare |

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|  | I have information to declare and I have attached a sealed envelope/password encrypted document containing details |

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| **Self declaration** |
| In accordance with the Data Protection Act 1998 I give my consent for the information contained in this form to be processed in accordance with Church policy for the purposes of recruitment and employment.I understand that if I am appointed, this application form will become part of my personal file and that if I am not appointed it will be stored for 6 months and then destroyed.By making this application I confirm that I am not barred from working with vulnerable groups and understand that to apply to work with children/vulnerable adults when barred from doing so is a criminal offence.I understand that if appointed, the fact that I have had pre-employment vetting check will be entered on the national CSAS confidential database in accordance with policy and will be retained indefinitely. I also understand that my Safeguarding Self Declaration Form will be held securely & in strict confidence and retained for 75 years.The information stated in this application, together with any accompanying papers is, to the best of my knowledge, correct. I understand that a false entry may lead to either an offer of employment being withdrawn, or disciplinary action being taken which could result in dismissal.Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**(If this form is submitted electronically then it will be printed for the applicant to sign at interview)** |

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| **Thank you for applying and your interest in working for St. Michael’s.** **We aim to respond to all applications and will be in touch as soon as possible. If, however, you have not received a response to your application within four weeks of submission, please assume that you have been unsuccessful on this occasion.** |