Staff Vacancy Application Form

Name:

Postapplied for:

When completed, this form (and any supporting documents) should be returned to:

The Headmaster

Mayfield Preparatory School

Sutton Road

Walsall

WS1 2PD

*The Queen Mary’s Schools’ Foundation is an equal opportunities employer.*

PLEASE USE BLOCK CAPITALS

**Personal details:**

|  |  |
| --- | --- |
| Surname | First names |
| Mr/Mrs/Miss/Ms/Other | Previous names | DfE number: (if applicable) |
| AddressPost code | Phone numbersHome:Business:Mobile: | Email: |
| NI number |

**Present appointment:**

|  |  |
| --- | --- |
| Present employer | Position held |
| Present basic salary |
| If appointed, when could you commence? |

**Eligibility for employment:**

|  |
| --- |
| Are you eligible for employment in the UK?  [ ] YES [ ] NO |
| Do you have proof of eligibility to work in the UK? [ ] YES [ ] NO |
| Do you require a Work Permit to work in the UK? [ ] YES [ ] NO |
| ***Note: To comply with the Immigration, Asylum and Nationality Act 2006, if you are invited to attend an interview, you must bring evidence of your eligibility to work in the UK, preferably passport or a document which includes your National Insurance Number, such as a P45, P46, P60 or a pay slip. No offer of employment will be made unless such evidence has been produced.*** |

**Details of education and training:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| School, colleges, university etc attended since 11 (earliest first). | Datesattended | Examinations (include those to be taken) | Pass/fail(includinggrade) | Date of examinations |
| SchoolsUniversity/college/other |  |  |  |  |

|  |
| --- |
| Further qualifications, including membership of any professional organisations.Attach further sheets if necessary. Tick if further sheets attached:[ ]  |
|  |

**Details of latest CPD, and Special Abilities Offered:**

|  |
| --- |
|  |

**Employment experience:**

(start with the earliest position first, and include your present post; say whether part or full time)

(please continue on another sheet if there is insufficient space. Tick box if additional material enclosed [ ]

|  |  |  |  |
| --- | --- | --- | --- |
| Dates | Employer’s name and address | Position held | Reasons for leaving |
| From | To |
|  |  |  |  |  |

**Leisure and other interests:**

(you may continue on another sheet if you wish) Tick here if further sheets enclosed: [ ]

|  |
| --- |
|  |

**Letter of application:**

|  |
| --- |
| You are invited to submit a letter of application to accompany this form, listing all information relevant to the application, and any other information you may wish to provide. It would be in your interests to provide as full a statement as possible at this stage. Please indicate if there are any attachments [ ]  |

**References:**

|  |
| --- |
| Please provide the names and addresses of three people to whom we may make reference prior to any interview. It would be preferred if one of these could be your present employer/headteacher (if appropriate). |
| 1 Name and address: | 2 Name and address: | 3 Name and address: |
| Telephone: | Telephone: | Telephone: |
| Email: | Email: | Email: |

|  |
| --- |
| If you have previously applied for a position with the School, or a school of the Queen Mary’s Foundation, please provide details, including the date, the position applied for, which school to which the application was made, and whether you were interviewed. |

|  |
| --- |
| If your ability to attend an~~d~~ interview or perform part of the ~~particular~~ job for which you are applying limited in any way, please provide details of how we may assist you in a separate letter so that appropriate arrangements can be made. |

**Applicant’s Declaration:**

|  |
| --- |
| **Data Protection Act 1998 (to be read and signed by the employee)**The School needs to collect and use certain types of information about employees, in order to operate its business and to fulfil its legal obligations under the Data Protection Act 1998. Information supplied on this form may be held by the School and the Governors, and enquiries made in processing your application may include reference to personal data held on The Disclosure and Barring Service. *I consent to the company holding this information on file, for as long as it considers necessary, to fulfil the purpose for which it was obtained and to process it in accordance with the requirements of the Act or other procedures implemented by the company for this purpose from time to time.* I confirm details in this application are correct and complete. I understand that canvassing or giving false information would disqualify my application, or if discovered after appointment may be regarded as grounds for dismissal.I also understand that appointment will be subject to satisfactory medical clearance, security clearance and references and will be conditional on a satisfactory disclosure from the Disclosure and Barring Service. The grounds for disqualification are not only that a person is barred from working with children (included on the children’s barred list) but also include, in summary, that: * They have been cautioned for, convicted of or charged with certain violent and sexual criminal offences against children and adults, at home or abroad
* Other orders have been made against them relating to their care of children
* They have had their registration cancelled in relation to childcare or children’s homes or have been disqualified from private fostering
* They are living in the same household where another person who is disqualified lives.

Signed:…………………………………………………………………………….………. Dated:……………………………………………………. |

QUEEN MARY’S SCHOOLS’ EQUAL OPPORTUNITIES MONITORING FORM

In order to assess how well our Equal Opportunities Policy is working, the Queen Mary’s Foundation monitors the process of staff selection.

Your co-operation in completing this form would be greatly appreciated. We must stress that any information you give will be strictly confidential. You are not obliged to answer any of the questions, but you will appreciate that for our monitoring policy to be effective, we rely on you to complete the form.

If you do not wish to answer any question(s), this will not affect the handling of your application in any way.

**Ethnic Origin**

Please tick one of the following categories.

I would describe my ethnic origin as:

|  |  |  |  |
| --- | --- | --- | --- |
|  | White  |  | Pakistani |
|  | Black – African Black – CaribbeanBlack – Other [please specify] |  | BangladeshiChineseAsian – other [please specify] |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  | Indian  |  | Other  |

**These categories were used for the most recent census and are recommended by the Commission for Racial Equality. They do not refer to birth, citizenship, or nationality, but to the ethnic group to which you belong.**

**Gender**

I am male/female

**Age**

My date of birth is ………………………………………………..

**Religious or other belief**

Religious belief \*:…………………………………………………………………………………..

Other fundamental belief \*:……………………………………………………………………..

**Disabilities**

I do/do not have any disabilities\*

\*If you answer positively to any of the above, please specify any special requirements that you may have.

………………………………………………………………………………………………………………

**Where did you see this application advertised?**