

APPLICATION FORM – Support Staff

Stephen Hawking School

A London Borough of Tower Hamlets Community Special School

Please ensure that you fully complete all sections in the application form. Please note that providing false information will result in the application being rejected, or withdrawal of any offer of employment, or summary dismissal if you are in post, and possible referral to the police. Please note that checks may be carried out to verify the contents of your application form.

Please FULLY complete the form in black ink. CV's are not accepted.

1. THE POST BEING APPLIED FOR AND CLOSING DATE

Vacancy Job Title:		
Closing Date:		Applications received after the closing date will not normally be considered.
The completed application form must be returned to: Business Manager, Stephen Hawking School, Brunton Place, London, E14 7LL, Tel: 0207 423 9848 Fax: 0207 423 9878. Email: businessmanager@stephenhawking.towerhamlets.sch.uk		

2. PERSONAL DETAILS

The information you supply on this form will be treated in confidence.

First Name (s):						
Last Name:						
<u>All Previous Names:</u>						
Current Address:					Resident at this address since:	
Post Code:				Country:		
Email:						
Home Tel. No:			Mobile Tel. No:			
National Insurance No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Daytime Tel. No:
PREVIOUS Address:						
If you have lived at your current address for less than 12 months.						

Are you free to remain and take up employment in the U.K. with no current immigration restrictions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you subject to any legal restrictions in respect of your employment in the UK?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please provide details separately.
Do you require a work permit?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please provide details separately.
If you are successful you will be required to provide evidence prior to your appointment.	
Which VISA do you currently hold?	
Do you hold a UK/EU Passport?	
Dates not available for interview - If these dates clash with the interview date we will try to re-arrange but cannot guarantee to do this.	
Are there any special arrangements which we can make for you if you are called for an interview and/or work based assessment?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please specify. For example, ground floor venue, sign language, interpreter, or any other.
Do you have a current full driving licence?	Yes <input type="checkbox"/> No <input type="checkbox"/>

3. CHILD PROTECTION DISCLOSURE

Have you ever been subject to a child protection investigation by your employer or the Independent Safeguarding Authority or any other Regulatory Body?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please provide details separately in an envelope marked 'confidential' of the outcome including any orders or conditions. This envelope will not be opened unless you are shortlisted and invited to interview.
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4. CURRENT OR MOST RECENT EMPLOYMENT - Including Voluntary Work

Name of Employer - Organisation:		
Department / Name of Line Manager:		
Address of Employer:		
Post Code		
Telephone No.		
Fax: No.		
Email:		
Job Title: <i>Please enclose a copy of your current job description</i>		Current Job description enclosed: Yes / No
Date appointed to current post:		
Current Salary: (& Other Benefits)		
Period of Notice:		
Date available to start new job:		
Date and Reason for Leaving (if applicable):		
Description of duties / responsibilities:		

5. HEALTH

Please note, a successful candidate will be required to complete a medical questionnaire and may be asked to attend a medical examination.

Please note, once a job offer has been made to any successful candidate the school will request your sickness absence record for the last 12 months and the number of periods of absence this represents.

6. PREVIOUS EMPLOYMENT OR WORK EXPERIENCE RECORD

FULL CHRONOLOGICAL HISTORY

Please provide a full history in chronological order since leaving secondary education, including periods of any post-secondary education/training, and part-time and voluntary work as well as full time employment, with start and end dates, explanations for periods not in employment or education/training, and reasons for leaving employment.

Job Title or Position	Name and address of school, other employer, or description of activity	Number on roll and type of school, if applicable	F/T or P/T	Dates				Reason for leaving
				From		To		
				Mth	Yr	Mth	Yr	
1								
2								
3								
4								
5								

Please enclose a continuation sheet if necessary. Please attach and label any additional sheets.

7. EDUCATION: QUALIFICATIONS OBTAINED FROM SCHOOL / COLLEGES / UNIVERSITIES

Name of Schools, Colleges, Universities etc.	Name of course	Date From To	Qualifications and Grades Achieved with Date

Please enclose a continuation sheet if necessary. Please attach and label any additional sheets.

8. PROFESSIONAL ASSOCIATION MEMBERSHIP / QUALIFICATIONS

Please give details of any professional qualifications including any professional or technical association membership obtained which may be relevant to the post.

Professional Body and Qualification	Course Details	Date Obtained

Please enclose a continuation sheet if necessary. Please attach and label any additional sheets.

9. TRAINING AND DEVELOPMENT

Please give details of any training and development courses or non qualification courses which support your application. Include any on-the-job training as well as formal courses.

Title of Training Programme/ Course and Brief Description	Duration of Course	Dates

Please enclose a continuation sheet if necessary. Please attach and label any additional sheets.

NB: You will be required to provide original certificates for all qualifications required for the post.

10. PERSONAL STATEMENT

Abilities, skills, knowledge and experience

Please use this section to explain in detail how you meet the requirements of the selection criteria set out in the person specification. This should include all aspects of your education and experience, including paid or unpaid work, study or training that you consider to be relevant to this position. You should not exceed 500 words. This may be a word processed document.

Please enclose a continuation sheet if necessary. Please attach and label any additional sheets.



11. ADDITIONAL INFORMATION

Job Share Details

Are you applying on a job share basis?

Yes No

If yes, are you applying with a partner?

Yes No

If yes, please give the name of your partner:.....

Your job share partner will need to complete a separate application form.

Language

Do you speak any of the following languages?

Bengali Chinese(Cantonese) Somali Vietnamese Other

Would you be willing to assist the school by using your language skills?

Yes No

12. REFERENCES

Give here details of two people who are willing to provide references relating to your Work experience and suitability for the post you have applied for.

The first referee should be your present or most recent Employer or equivalent person. If you are not currently working with children, please also provide a referee from your most recent employment involving children.

Referees will be asked about disciplinary offences relating to children, which may include any in which the penalty is "time expired" and whether you have been the subject of any child protection concerns, and if so, the outcome of any enquiry or disciplinary procedure.

NB: References will not be accepted from relatives or from people writing solely in the capacity of friends.

1. Name:.....	2. Name:.....
Position (Job title):.....	Position (Job title):.....
Work relationship:.....	Work relationship:.....
Organisation:.....	Organisation:.....
Address:.....	Address:.....
.....
.....
Post Code:	Post Code:
Tel No.:.....	Tel No.:.....
Fax No:.....	Fax:
Please provide email address if you have one	Please provide email address if you have one
E-mail:.....	E-mail:.....

NB. References will normally be requested from Referees for all short-listed candidates before interview.

13.1 DECLARATION

Relatives / Other Interests

Any candidate who directly or indirectly canvasses a Councillor, senior officer of the Council, or a Stephen Hawking School Governor will be disqualified.

Are you related to, or do you have a close personal relationship with a Member (Councillor) or employee of the London Borough of Tower Hamlets or Stephen Hawking School Governor/s, Employee/s, Pupil/s?

Yes No

If yes, please provide details separately in an envelope marked 'confidential' This envelope will not be opened unless you are Short-listed and invited to interview.

If appointed, do you have any interests, carry out any work (paid and unpaid), or hold any appointments that may conflict with this school's and/or Council's employment?

Yes No

If yes, please provide details separately in an envelope marked 'confidential' This envelope will not be opened unless you are Short-listed and invited to interview.

Criminal Convictions

COMPULSORY DECLARATION OF ANY CONVICTIONS, CAUTIONS OR REPRIMANDS, WARNINGS OR BIND-OVERS:

If you are shortlisted you will be required to complete the enclosed 'Disclosure Criminal Record' form and bring the completed form to interview (or complete a form at interview). The information you give will be treated as strictly confidential. Disclosure of conviction, caution, warning, or reprimand will not automatically disqualify you from consideration. Any offence will only be taken into consideration if it is one which would make you unsuitable for the type of work you are applying for. However, offences relating to children may make you unsuitable since this is a 'regulated position' under the Criminal Justice & Courts Services Act 2000.

(a) Under the Criminal Justice & Courts Services Act 2000 it is an offence for an individual who has been disqualified from working with children to knowingly apply for, offer to do, accept, or do any work in a 'regulated position'. The position you are applying for is a "regulated position".

(b) Canvassing, directly or indirectly, an employee or governor will disqualify the application.

(c) Candidates recommended for appointment will be required to provide a satisfactory Enhanced DBS certificate and/or Barred List Check, complete a pre-employment medical questionnaire and may be required to undergo a medical examination.

NB: A copy of this notice will be sent to your referees. If you declare that you have a criminal record this will be assessed in relation to the tasks you will be required to perform and the circumstances in which the work is to be carried out once a job offer is made.

Failure to disclose any conviction(s) for a 'regulated' post may lead to the withdrawal of the offer of employment.

Safer Recruitment

The school follows rigorous procedures for safeguarding and promoting the well being of our pupils. Appointments will be conditional upon a Satisfactory Enhanced Disclosure and/or Barred List Check being obtained via the Disclosure Barring Service.

We use the Disclosure Barring Service (DBS checks) to assess the suitability of successful applicants and fully comply with the DBS's Code of Practice. We undertake to treat all applicants fairly and not to discriminate unfairly against anyone who is the subject of a disclosure on the basis of convictions or other information revealed.

Data Protection Act

The information collected on this form will be used in compliance with the Data Protection Act 1998. The information is collected for the purpose of administering the employment and training of employees. The information may be disclosed, as appropriate, to the governors, to Occupational Health, to the Teachers Pensions Agency, to the Department for Education, to pension, payroll and personnel providers and relevant statutory bodies. You should also note that checks may be made to verify the information provided and may also be used to prevent and/or detect fraud.

Tower Hamlets Council reserves the right to collect, store and process personal data about applicants in so far as it is relevant to your application. This also applies during employment and for six years thereafter. This includes processing of sensitive data for the purposes of monitoring the Council's equality and diversity policy.

13.2 DECLARATION (Continued)

Statement to be Signed by the Applicant. This statement must be ticked and signed.

DECLARATION

Please note:

1. When completed, this form should be returned in accordance with the instruction in the advertisement for the job or in the applicant's information pack.
2. Canvassing, directly or indirectly, an employee or governor will disqualify the application.
3. Candidates recommended for appointment will be required to provide a satisfactory Enhanced DBS certificate and/or Barred List Check, provide original certificates of qualifications required for the post, complete a pre-employment medical questionnaire and may be required to undergo a medical examination.
4. The council, including this school is committed to anti-fraud culture and participates in statutory anti-fraud initiatives.

I certify that, to the best of my knowledge and belief all particulars included in my application are correct. I understand and accept that providing false information will result in my application being rejected or withdrawal of any offer of employment, or summary dismissal if I am in post, and possible referral to the police. I understand and accept that the information I have provided may be used in accordance with the section headed 'data protection' in this application form, and in particular that checks may be carried out to verify the contents of my application form. I acknowledge that the Council is under a duty to protect the public funds it administers and to this end I agree it may use information provided on this form for prevention and detection of crime and it may share this information with other bodies solely for these purposes.

I confirm that I am **not** on either of the two DBS 'barred lists' of individuals who are unsuitable to work with children and/or adults, nor ever have been disqualified to work with children, and that I am **not** subject to sanctions imposed by a regulatory body.

If shortlisted for interview I agree to complete a 'Disclosure Criminal Record' Form.

If you are returning this form by e-mail, you will be asked to sign your application upon being called for interview

Signed:..... **Date:**.....

Print Name:.....

NB: Candidates selected for interview will be notified before the date of interview. The date of interview will usually be stated in the job advert. It is regrettable that applicants who do not hear further must conclude that their application has not been successful on this occasion.

Thank you for your application.

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EMPLOYMENT MONITORING

Stephen Hawking School has an equality and diversity policy and is keen to ensure that it is working effectively.
The information you provide here will be treated in the strictest confidence and will be used only for statistical monitoring; it is not used as part of the interview selection process.

Post Applied for:.....

Last name:.....

Postcode:.....

ABOUT YOU

Date of Birth: Age:.....

Where did you see the post advertised? (Name of newspaper, journal, vacancy bulletin, internet, friend, etc)
.....

Are you? Female Male Transgender A Tower Hamlets resident? Yes No

Applying for? Full time Part time A job share applicant? Yes No

ETHNICITY & DISABILITIES

Ethnic Group

	<i>Workforce Census Code</i>		<i>Please tick</i>
White	WBRI	British English Welsh Northern Irish Scottish	<input type="checkbox"/>
	WIRI	Irish	<input type="checkbox"/>
	OOTH	Irish Traveller	<input type="checkbox"/>
	OOTH	Gypsy	<input type="checkbox"/>
	WOTH	Other White background	<input type="checkbox"/>
Mixed	MWBC	White and Black Caribbean	<input type="checkbox"/>
	MWBA	White and Black African	<input type="checkbox"/>
	MWAS	White and Asian	<input type="checkbox"/>
	MOTH	Other Mixed background	<input type="checkbox"/>
Asian or Asian British	AIND	Indian	<input type="checkbox"/>
	APKN	Pakistani	<input type="checkbox"/>
	ABAN	Bangladeshi	<input type="checkbox"/>
	CHNE	Chinese	<input type="checkbox"/>
	AOTH	Other Asian background	<input type="checkbox"/>
Black or Black British	BCRB	Caribbean	<input type="checkbox"/>
	BAFR	African	<input type="checkbox"/>
	BOTH	Other Black background	<input type="checkbox"/>
Other ethnic group	OOTH	Arab	<input type="checkbox"/>
		<i>Write in:</i>	<input type="checkbox"/>
Prefer not to say	REFU		<input type="checkbox"/>

ETHNICITY & DISABILITIES Continued

Religion

Please tick

No religion	<input type="checkbox"/>
Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	<input type="checkbox"/>
Buddhist	<input type="checkbox"/>
Hindu	<input type="checkbox"/>
Jewish	<input type="checkbox"/>
Muslim	<input type="checkbox"/>
Sikh	<input type="checkbox"/>
Any other religion <i>write in</i>	<input type="checkbox"/>
	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>

Disability

Do you consider that you have a disability?

Please tick

Yes <i>Please complete the grid below</i>	<input type="checkbox"/>
No	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>
My disability is:	
<i>Please tick</i>	
Physical Impairment	<input type="checkbox"/>
Sensory Impairment (Sight / Hearing)	<input type="checkbox"/>
Mental Health Condition	<input type="checkbox"/>
Learning Disability/ Difficulty	<input type="checkbox"/>
Long standing illness	<input type="checkbox"/>
Other	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>

Sexual Orientation

Please tick

Bi-sexual	<input type="checkbox"/>
Gay	<input type="checkbox"/>
Lesbian	<input type="checkbox"/>
Heterosexual	<input type="checkbox"/>
Other	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>

Gender

Please tick

Female	<input type="checkbox"/>
Male	<input type="checkbox"/>
Transgender	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>

Personal relationship

Please tick

Single	<input type="checkbox"/>
Living together	<input type="checkbox"/>
Married	<input type="checkbox"/>
Civil Partnership	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>

DECLARATION

I confirm that the information given in this monitoring form is correct. I give my consent to the collection, storage and processing of my personal data.

Signed:..... Dated:.....