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| **Application Form**  **Teacher & School Leadership Posts**  *Confidential* |

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| **Information for applicants:**  **Data Protection: In accordance with the DPA 2018 and UK GDPR, the information you provide may contain sensitive personal data. If you are subsequently employed, the information you provide will be held on our files. The Council may process the information for reporting purposes and we will ensure that your information is handled in accordance with the principles of the Data Protection Act and you will not be personally identifiable from the reports.**  Please complete this form in **black ink** or **type** and complete all sections of the form. We do not accept CVs. |

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| **Details of Post Applied For:** | |
| Job Title |  |
| Job Reference Number (if any) |  |
| Please confirm the date you would be able to start work / notice period, if you are appointed |  |
| Where did you see this post advertised? |  |

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| **Personal Details:** | | | | | | | |
| Title | Mr / Mrs / Miss / Other | | |  | |  | |
| Fore Name(s) |  | | | Surname | |  | |
| Previous Surname |  | | | | | | |
| Address  Postcode |  | | | | | | |
| Contact | Home no: |  | | | | | |
| Mobile no: |  | | | | | |
| E-mail : |  | | | | | |
| National Insurance Number | |  | | | | | |
| Teacher Reference Number | |  | | | | | |
| Are you required to hold a work permit or a certificate of sponsorship? | | YES | NO | | Are there any time limits, limitations, restrictions on your right to work in the U.K.? If yes, please outline details below | | |
|  | | | | | |
| **Declaration of Relationships:** Any candidate who canvasses a Councillor, Management Committee Members or School or Council employees in respect of appointments will be disqualified. | | | | | | | |
| Are you related to or partner of, or do you have a close personal relationship with, any elected member or senior officer of the local authority or a member of staff or governor of the school? | | | | | | | YES / NO |
| If YES, please provide below his/her name and role, and state your relationship: | | | | | | | |
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| **Education and Qualifications:**  Please begin with Teaching Qualifications, PGCE or other qualifications, (e.g. BTEC, degrees, post graduate or equivalent), GCSE, “A” Levels, “O” Levels or equivalent and any other relevant professional qualifications. | | | | |
| Educational Training Establishment Name of Institution (e.g. School, College or University | Course / Subject | Dates Attended | | Grade / Award (if applicable) |
| From  Month/Year | To  Month/Year |
|  |  |  |  |  |
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| **Qualified Teacher Status or Qualified Teacher Learning and Skills Status – Do you hold?** | | | | |
| Qualified Teacher Status (QTS) | YES | NO | Date awarded or expected to be awarded, if applicable | |
| Date: | |
| Qualified Teacher Learning & Skills Status (QTLS) | YES | NO | Date awarded (as above) | |
| Date: | |
| **National Professional Qualification for Headship (NPQH)** | | | | |
| Do you hold NPQH? | YES | NO | If yes, date/if no, date expected to be awarded? | |
| **Membership of Professional Bodies:** Please give details of any relevant professional bodies to which you belong. | | | | |
| Name of Professional Body | | Membership Status | | Date Membership Commenced |
|  | |  | |  |

**Please add additional rows if required**

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| --- | --- | --- | --- | --- |
| **Other Training and Professional Development:** | | | | |
| Please give details of any courses undertaken or which you are currently undertaking which you have not already detailed in Education and Qualifications section and which you consider to be relevant to this application. | | | | |
| Course Title | Course Provider | Dates Attended | | Award (if any) |
| From (Month/Year) | To (Month/Year) |
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**Please add additional rows if required**

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| **Details of Current or Most Recent Teaching Appointment: Referee 1** | | | | | | | | |
| Post Held (and subjects taught if appropriate) | |  | | | | | | |
| Please give a brief outline of significant responsibilities/duties in your present or most recent post directly relevant to the post for which you are applying. | |  | | | | | | |
| Dates Employed From & To (month/year) | | From | |  | | To | |  |
| School Name and Address | |  | | | | | | |
| Name of Local Authority/ **Academy Trust or other employers** | |  | | | | | | |
| Type of School (High, Community, Aided, Independent etc.) | |  | | | | | | |
| Pupil Number on Roll:  Information | |  | | | | | | |
| Age Range: | |  | | | | | | |
| Gender / Single /Mixed: | |  | | | | | | |
| Salary Details | Pay Range (e.g. Main Pay Range, Leadership Pay Spine): specify spinal point | | | |  | | | |
| Basic Annual salary (if part-time, specify the FTE): | | | | £ | | | |
| Additional allowances (state type e.g. TLR, and annual value):  Plus London Weighting if applicable | |  | | | | | |
| Are you still employed by this establishment? | | | Yes  No | | | | | |
| Reason for Leaving | | |  | | | | | |
| **Previous Teaching Appointments:** (N.B. if you are newly qualified please specify your teaching practices) | | | | | | | | |
| Please give details of **all previous teaching appointments** you have undertaken, starting with the most recent. Details of employment undertaken outside of teaching, and any other gaps in employment, should be recorded on the next section. Please use a continuation sheet if necessary. | | | | | | | | |
| Name & Address of employer: | | |  | | | | | |
| Name of Local Authority/ **Academy Trust or other employers** | | |  | | | | | |
| Name & Address of School/Establishment: | | |  | | | | | |
| Type of school: | | | Boys  Girls  Mixed (Please select as appropriate) | | | | | |
| Number on roll: | | |  | | | | | |
| Telephone no: | | |  | | | | | |
| Position title: | | |  | | | | | |
| Subjects taken: | | |  | | | | | |
| Dates Employed: | | | From: | | | | To: | |
| Pay Range and Spinal Point (e.g. Main Pay Range, Leadership Pay Spine or Upper Pay spine or any other): | | |  | | | | | |
| Basic Annual Salary | | |  | | | | | |
| Additional allowances e.g. TLR (Please specify) | | |  | | | | | |
| Reason for Leaving | | |  | | | | | |

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| --- | --- | --- |
| Name & Address of employer: |  | |
| Name of local authority/ **Academy Trust or other employers** |  | |
| Name & Address of School/Establishment: |  | |
| Type of school: | Boys  Girls  Mixed (Please select as appropriate) | |
| Number on roll: |  | |
| Telephone no: |  | |
| Position title: |  | |
| Subjects taken: |  | |
| Dates Employed: | From: | To: |
| Pay Range and Spinal Point (e.g. Main Pay Range, Leadership Pay Spine or Upper Pay spine or any other): |  | |
| Basic Annual Salary |  | |
| Additional allowances e.g. TLR (Please specify) |  | |
| Reason for Leaving |  | |

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| --- | --- | --- |
| Name & Address of employer: |  | |
| Name of Local Authority/ **Academy Trust or other employers** |  | |
| Name & Address of School/Establishment: |  | |
| Type of school: | Boys  Girls  Mixed (Please select as appropriate) | |
| Number on roll: |  | |
| Telephone no: |  | |
| Position title: |  | |
| Subjects taken: |  | |
| Dates Employed: | From: | To: |
| Pay Range and Spinal Point (e.g. Main Pay Range, Leadership Pay Spine or Upper Pay spine or any other): |  | |
| Basic Annual Salary |  | |
| Additional allowances e.g. TLR (Please specify) |  | |
| Reason for Leaving |  | |

**Please add additional rows if required**

**…………………………**

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| --- | --- | --- |
| **Other Skills and experience:** | | |
| Please give details below of any voluntary work or other paid or unpaid employment that you have not detailed elsewhere in your employment history | | |
| Date From (Month/Year) | Date To (Month/Year) | Details |
|  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Periods When Not Working/Unaccounted for:** | | | | | |
| Please give details of any periods that are not accounted for by full time employment, education training. This would include periods of unemployment etc. since leaving secondary education. | | | | | |
| Date From (Month/Year) | | Date To (Month/Year) | Reason | | |
|  | |  |  | | |
|  | |  |  | | |
| **Supporting Statement:**  Please explain (ideally in no more than 2 sides of A4) how your knowledge, skills and experience, gained in paid or unpaid work, study or training, meet the person specification as set out in job description. Make sure you address all the criteria marked “A” for Application Form.  **Please continue on separate sheet if necessary** | | | | | |
| Please supply us with a minimum of two references **which covers all employers during the last 5 years of employment** . The first referee must be your current, or if you are not employed, your most recent employer - this reference must be given on behalf of the School/ Organisation. Other references must be previous employers, not friends, or former colleagues (unless a former Head teacher/School Governor/Manager who has since left that School/Organisation) and must not be related to you. Occasionally references may be sought from previous employers not listed below. **All references for positions within schools will be taken prior to interview.**   * If you are not currently working with children but have done so in the past, your second referee must be that employer. If you are a Newly Qualified Teacher, one referee must be your Teacher Training tutor/college tutor and the second referee from a school where you have had teaching practice. References relating to your employment at a school or college must be from the Head teacher or Principal. If you are a serving (or ex) Head teacher or Principal, your referee should be the Chair of the Governing Body. If you are a Deputy Head teacher your referee should be the Head teacher.   We reserve the right to contact other previous employers for information, prior to interview, to verify details on your application form, such as particular experience or qualifications. | | | | | |
| **Referee 1** | | | | **Referee 2** | |
| Title, Name, Surname |  | | | Title, Name, Surname |  |
| Job Title |  | | | Job Title |  |
| School/Company  /Business Name |  | | | School/Company  /Business Name |  |
| Address |  | | | Address |  |
| Tel. Number |  | | | Tel. Number |  |
| Email Address |  | | | Email Address |  |
| What capacity do you know the referee? |  | | | What capacity do you know the referee? |  |
| **Referee 3** | | | | **Referee 4** | |
| Title, Name, Surname |  | | | Title, Name, Surname |  |
| Job Title |  | | | Job Title |  |
| School/Company  /Business Name |  | | | School/Company  /Business Name |  |
| Address |  | | | Address |  |
| Tel. Number |  | | | Tel. Number |  |
| Email Address |  | | | Email Address |  |
| What capacity do you know the referee? |  | | | What capacity do you know the referee? |  |

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| We welcome applications from candidates with disabilities. Please let us know if you require any reasonable adjustments to enable you to attend the interview. |
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**DISCLOSURE AND BARRING CHECKS**

**Criminal Records Checks - Overseas**

From April 2017, if an employee has lived, worked or studied overseas for a period of 12 months or more in the past 10 years and require a visa they will now be required to provide an overseas criminal record certificate.   Schools now have a statutory duty to inform Tier 2 skilled worker applicants of the need to source and submit overseas criminal record certificates as part of the application process - The Skilled Worker route since December 2020

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| The post for which you are applying is **exempt from the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in *the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amendment) (England and Wales) Order 2020*).** If you are appointed you will be required to undertake an Enhanced Disclosure & Barring Service (DBS) with a check against the Children’s Barred List. |
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| By submitting this application form you are declaring that the information you have provided is true and accurate to the best of your knowledge. Providing false information or knowingly omitting or concealing any relevant fact about your eligibility for employment will result in your application being withdrawn.  If any of the information within your application is found to be untrue or misleading after appointment, you may be dismissed without notice.  Harrow Council is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form within this authority for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for these purposes.  I hereby certify that all the information given by me on this form is correct to the best of my knowledge, that all the questions relating to me have been accurately and fully answered and that I possess all the qualifications which I hold. |
| Signature: |
| Date: |

**Equalities Monitoring Form**

**Please note this form will be separated from your application upon receipt and will not be shared with the panel.**

Why do we monitor?

Harrow Council is committed to the fair treatment of all it’s staff, potential staff and users of it’s services regardless of age, sex, disability, race, religion or belief, sexual orientation or gender reassignment, marriage and civil partnership, pregnancy and maternity, or offending background. We actively promote equality of opportunity for all with the right mix of talent, skills and potential and welcome applications from a wide range of candidates. We select all candidates for interview based on their skills, qualifications and experience. Harrow Council has a legal responsibility to promote and advance equality. The information will also enable us to monitor our progress with regards to addressing inequality and allow our employees and service users to see how we are performing on equality.

Harrow Council is committed to recruiting the best applicant for the job, regardless of any factor than the ability to do the job. To help us monitor, please complete this recruitment monitoring form. All information will be treated in the strictest confidence and will be separated from your application on receipt. **It will not be seen by those involved in the assessment of your application.** Your cooperation in completing this is therefore welcome and helpful.

**Age - What is your age group?**

|  |  |  |  |
| --- | --- | --- | --- |
| Under 16 years |  | 16 – 24 years |  |
| 25-44 years |  | 45 – 64 years |  |
| 65 years and over |  |

**Disability – Are your day-to-day activities limited because of a health problem or disability which has lasted or is expected to last at least 12 months?**

|  |  |  |  |
| --- | --- | --- | --- |
| No |  | Yes, affecting mobility |  |
| Yes, affecting hearing |  | Yes, affecting vision |  |
| Yes, a learning disability |  | Yes, mental ill-health |  |
| Yes, another form of disability, (please specify) |  |  |  |

**Ethnic origin - What is your ethnic origin?**

**Asian or Asian British**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Afghan |  | Bangladeshi | | |  |
| Chinese |  | Indian | | |  |
| Pakistani |  | Sri Lankan | | |  |
| Any other Asian background – (please specify) |  |  |  |  | |

**Black or Black British**

|  |  |  |  |
| --- | --- | --- | --- |
| African |  | Somali |  |
| Caribbean |  |
| Any other Black background – (please specify) |  | | |

**Mixed background**

|  |  |  |  |
| --- | --- | --- | --- |
| White and Black African |  | White and Asian |  |
| White and Black Caribbean |  |
| Any other mixed background - please specify |  | | |

**Other ethnic background**

|  |  |  |  |
| --- | --- | --- | --- |
| Arab |  | Iranian |  |
| Any other Ethnic group – please specify |  | | |

**White or White British**

|  |  |  |  |
| --- | --- | --- | --- |
| Albanian |  | English |  |
| Gypsy / Irish Traveller |  | Irish |  |
| Polish |  | Romanian |  |
| Scottish |  | Welsh |  |
| Any other White background - please specify |  | | |

**Marriage or Civil Partnership**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Are you married? | **Yes** |  | **No** |  |
| Are you in a Civil Partnership? | **Yes** |  | **No** |  |

**Pregnancy or Maternity**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Have you been pregnant and / or on maternity leave during the past 2 years? | Yes |  | No |  |

**Religion and belief - What is your religion?**

|  |  |  |  |
| --- | --- | --- | --- |
| Buddhism |  | Judaism |  |
| Christianity (all denominations) |  | Sikhism |  |
| Hinduism |  | Zoroastrian |  |
| Islam |  | No religion / Athiest |  |
| Jainism |  | Other please specify |  |

**Sex – Are you?**

|  |  |  |  |
| --- | --- | --- | --- |
| Male |  | Female |  |

**Gender Reassignment - Is your gender identity the same as the gender you were assigned at birth?**

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

**Sexual orientation – What is your sexual orientation?**

|  |  |
| --- | --- |
| Bisexual |  |
| Gay Man |  |
| Gay Woman / Lesbian |  |
| Heterosexual |  |
| Other please specify |  |