|  |  |  |
| --- | --- | --- |
| POSITION APPLIED FOR | | Part Time (0.6 FTE) Teacher of Sports and PE |
|  | | |
| PERSONAL DETAILS | | |
| Title: | Surname: | |
| Forename(s): | | Preferred Name: |
| Former Name:  (including maiden name) | | National Insurance Number: |
| Address: (*House No, Name*)  *(Road)*  *(Town, City)*  *(County)* | | |
| Postcode: | | |
| How long have you lived at this address? | | *If less than 5 years, please provide all addresses for the past 5 years below* |
| Previous Address:  *(House No, Name)*  *(Road)*  *(Town, City)*  *(County)* | | Previous Address:  *(House No, Name)*  *(Road)*  *(Town, City)*  *(County)* |
| Postcode: | | Postcode: |
| Length of time at address: | | Length of time at address: |
| CONTACT DETAILS | | |
| email: | | |
| Home telephone: | | Mobile telephone: |
| Work telephone: | | |
| *If there is sufficient space, please continue on a separate sheet if necessary, giving page number and title heading.*  21 October 2024 | | |

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| ACADEMIC AND VOCATIONAL QUALIFICATIONS | | | | | |
| SCHOOL/COLLEGE/  UNIVERSITY | AWARDS/QUALIFICATIONS  (title and level) | | DATE OBTAINED  (dd/mm/yyyy) | | GRADES  If applicable |
|  |  | |  | |  |
|  | | | | | |
| FURTHER EDUCATION AND CAREER HISTORY | | | | | |
| Please provide full details of all positions held and of all training/further education, employment, self-employment and unpaid work since leaving secondary education.  Please start with your current or most recent employer and in each case give the reason for leaving employment.  Please provide explanations for any periods when you were not in employment, further education or training. | | | | | |
| EMPLOYER/TRAINING  ESTABLISHMENT  (including dates) | | POSITION HELD  (including subject taught and at which level) | | REASON FOR LEAVING | |
|  | |  | |  | |

*If there is sufficient space, please continue on a separate sheet if necessary, giving page number and title heading.*

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|  |  |  |
| --- | --- | --- |
| FURTHER EDUCATION AND CAREER HISTORY continued | | |
| EMPLOYER/TRAINING  ESTABLISHMENT  (including dates) | POSITION HELD  (including subject taught and at which level) | REASON FOR LEAVING |
|  |  |  |

*If there is sufficient space, please continue on a separate sheet if necessary, giving page number and title heading.*

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| --- | --- | --- | --- | --- |
| PROFESSIONAL DEVELOPMENT | | | | |
| LONG COURSES (attended during the last 3 years) | | | | |
| NAME OF COURSE  (and award, if gained) | PROVIDER | FULL-TIME,  PART-TIME OR  SECONDED | FROM | TO |
|  |  |  |  |  |
|  |  |  |  |  |
| SHORT COURSES (attended during the last 3 years) | | | | |
| NAME OF COURSE  (and award, if gained) | PROVIDER | FULL-TIME,  PART-TIME OR  SECONDED | FROM | TO |
|  |  |  |  |  |

*If there is sufficient space, please continue on a separate sheet if necessary, giving page number and title heading.*

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| --- | --- | --- |
| CURRENT SALARY | | |
| SALARY (basic)  (if appropriate, please indicate spine point) | ADDITIONS  (Please indicate responsibility points, London Allowance etc) | |
|  |  | |
| TOTAL SALARY |  | |
|  |  |  |
| GENERAL | | |
| Do you have Qualified Teacher Status? Yes □ No □ | | |
| Do you have a current full UK driving licence? Yes □ No □ | | |
| Please provide full details of membership of any professional bodies. | | |
|  | | |
| Please set out in detail below a statement in support of your application, which addresses the criteria in the person specification for this post. | | |
|  | | |

*If there is sufficient space, please continue on a separate sheet if necessary, giving page number and title heading.*

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| OUTSIDE INTERESTS | | | |
|  | | | |
|  |  |  |  |
| Please confirm if you know any existing employee, volunteer or Governor at Pitsford School and if so, please provide full details of how you know them. | | | |
|  | | | |

*If there is sufficient space, please continue on a separate sheet if necessary, giving page number and title heading.*

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| REFEREES |
| Please provide at least two professional referees. One referee should be your current or most recent employer. |
| REFEREE 1 |
| Name: |
| Position: |
| Address: |
| Contact Telephone: |
| email: |
| REFEREE 2 |
| Name: |
| Position: |
| Address: |
| Contact Telephone: |
| Email: |

*If there is sufficient space, please continue on a separate sheet if necessary, giving page number and title heading.*

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| DATA PROTECTION |
| The information that you provide on this form will be used to process your application for employment. The personal data that you provide will be stored and used in a confidential manner to help with our recruitment process. More details as to how we will process your data is set out in the Recruitment Privacy Notice and Data Protection Policy.  If you succeed in your application and take up employment with Pitsford School, the information will be used in the administration of your employment.  We may check the information provided by you on this form with third parties. |
|  |
| DECLARATION |
| As the job for which you are applying involves substantial opportunity for access to children, it is important that you provide us with accurate answers. You should be aware that we will institute our own checks on successful applicants with the Disclosure and Barring Service (DBS), and, where appropriate, a check of the Barred List maintained by the DBS, and any offer of employment will be made conditional on obtaining such satisfactory checks.  It is a criminal offence for any person who is disqualified from working with children to attempt to apply for a position within the School. We will report the matter to the Police and/or the DBS if:   * We received an application from a disqualified person; * We are provided with false information in, or in support of, an applicant’s application; * We have serious concerns about an applicant’s suitability to work with children. |
| I have not been disqualified from working with children, I am not prohibited from working with children, and I am not subject to any sanctions imposed by a regulatory body (e.g. the General Teaching Council for England, or the Teaching Regulation Agency).  I declare that the information I have given in this application form is accurate and true. I understand that providing misleading or false information will disqualify me from appointment or if appointed, may result in my dismissal.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Signature) (Date) |

*Please return your completed application form to Mrs J Ross, Headmaster’s PA.*