The Boleyn Trust is committed to equality, safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment. An enhanced Disclosure and Barring Service (DBS) check is required for all successful applicants.

|  |  |  |
| --- | --- | --- |
| Position applied for | : |  |
| School / Head Office | : |  |

Personal Details

|  |  |
| --- | --- |
| Title: | Full postal address: |
| Last name: |
| First name(s): |
| Known as: |
| Daytime telephone number: |
| Evening telephone number: |
| Mobile number: |
| Email: | |

How would you like us to contact you?  Email

Post

Are you eligible to work in the UK / EEA?  Yes

No

Do you need a work permit or sponsorship certificate to work in the UK?  Yes

No

Do you require further leave to remain?  Yes

No

If yes, please clarify your status:

If your application is successful, you will be asked to provide documentary evidence of your entitlement to work in the UK before you commence your employment.

Disability Discrimination Act

We are able to make provision for people with special needs. Such adjustments may include arranging a signer, providing information on tape, in braille or large print, or changing the location of the interview if access to an upper floor is not possible.

Is there any such help you require for interview or throughout the application process?  Yes

No

If yes, please state:

Employment History

Please start with your most recent / current employment. If you not have any employment history, please leave blank.

|  |  |  |  |
| --- | --- | --- | --- |
| Employers name | : |  | |
| Employers address | : |  | |
| Position held | : |  | |
| Dates | : | From:  To: | Salary: |
| Reason for leaving: | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Employers name | : |  | |
| Employers address | : |  | |
| Position held | : |  | |
| Dates | : | From:  To: | Salary: |
| Reason for leaving: | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Employers name | : |  | |
| Employers address | : |  | |
| Position held | : |  | |
| Dates | : | From:  To: | Salary: |
| Reason for leaving: | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Employers name | : |  | |
| Employers address | : |  | |
| Position held | : |  | |
| Dates | : | From:  To: | Salary: |
| Reason for leaving: | | | |

Education, training and qualifications

Please provide details of your qualifications gained, including grades from secondary school to current date.

|  |  |  |
| --- | --- | --- |
| Name of establishment | : |  |
| Examination results  (subject(s), level(s) grade(s) | : |  |
| Dates | : | From:  To: |

## Professional qualifications / registrations

|  |  |  |
| --- | --- | --- |
| Name of professional body | : |  |
| Teacher reference number | : |  |
| Date obtained | : |  |

|  |  |  |
| --- | --- | --- |
| Name of professional body | : |  |
| Membership grade and number | : |  |
| Date obtained | : |  |

|  |  |  |
| --- | --- | --- |
| Name of professional body | : |  |
| Membership grade and number | : |  |
| Date obtained | : |  |

|  |  |  |
| --- | --- | --- |
| Name of professional body | : |  |
| Membership grade and number | : |  |
| Date obtained | : |  |

|  |  |  |
| --- | --- | --- |
| Name of professional body | : |  |
| Membership grade and number | : |  |
| Date obtained | : |  |

## Statement in support of application

Please use this space to tell us how you meet each of the points on the person specification – you will find it useful to refer to the Guidance Notes to help you complete this part of the form. We need to have this information in order to consider your application.

## Referees

Please give the name, address and status of two persons who know you in a professional capacity and who have agreed to their names being used. Unless there are good reasons to the contrary, one of the referees should represent your present employer. For trainee teachers, one reference should be from your major placement school. If you are currently working in a school, one of the referees needs to be the Headteacher / Principal.

|  |  |
| --- | --- |
| Name: |  |
| Status / role: |  |
| Address: |  |
| Tel: |  |
| Email: |  |

|  |  |
| --- | --- |
| Name: |  |
| Status / role: |  |
| Address: |  |
| Tel: |  |
| Email: |  |

## Protection of Children

Disclosure of criminal background is required of those with substantial access to children.

## Convictions

This appointment is excluded from the non-disclosure provisions under the Rehabilitation of Offenders Act 1974. Applicants must declare any convictions which for other purposes are “spent” and in the event of employment, failure to disclose such convictions could result in dismissal or disciplinary action. Any information will be treated confidentially.

Do you have any spent or unspent criminal convictions?  Yes

No

Are you currently under investigation, awaiting trial, verdict or sentencing in any criminal proceedings?  Yes

No

If yes, please provide details including the offence and the date.

## Declaration

I declare that the information I have given on this form and additions is correct. I understand that any offer of employment will be subject to satisfactory references and medical examination. Any misleading statements or deliberate omissions will disqualify my application and lead to instant dismissal.

I consent to the necessary enquiries and checks being undertaken by the Boleyn Trust in order to confirm that the information I have included in this application form is correct and to verify the authenticity of my qualifications.

I understand that if I am successful in my application any information contained in this form together with any obtained in relation to it, will be retained by the Boleyn Trust during the course of my employment and for a reasonable time after the employment ends (pursuant to the Data Protection Act 1998).

I confirm I have no objection to the Boleyn Trust making an application to the Disclosure and Barring Service for information about any previous convictions, which I may or may not have on record and I confirm that I will sign the necessary application form giving authority to make this search (pursuant to the Police Act 1997 as amended by the Protection of Children Act 1999).

I declare that I am not disqualified from working with children (pursuant to Criminal Justice and Court Services Act 2000).

I can confirm that I do not live in the same house household where another person who is disqualified lives or works or is currently under investigation.

I accept the data protection terms above and declare that the information I have given on this form and additions is correct.

Signed: ……………………………………………………

Dated: ……………………………………………………

**Please note: if you have sent this application electronically, you will be asked to sign the form should you be invited to an interview.**