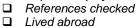
LADY MANNERS SCHOOL

Shutts Lane, Bakewell, Derbyshire, DE45 1JA Tel: 01629 812671 <u>www.ladymanners.net</u>

Chair of Panel Checklist:				
	Application form signed			

Gaps in employment checked





APPLICATION FORM (SHORTENED)

The information contained in this form will be used in administering the recruitment process in accordance with the General Data Protection Regulation. Please see the Workforce Privacy Notice at www.ladymanners.net/policies

Post applied for		Job Reference No.	
PERSONAL DETAILS			
Surname	Forename)	Title
Previous Name / Maiden Name (if ap	oplicable)		
Address			
Post Code			
Home Telephone Number	Mobile)	
E-mail Please note that if you supply an email address, thi	nis will he used as the main met	had of contact	
PRESENT EMPLOYMENT	- Will be deed do the main mea	iod of contact	
Present Post Title & Summary of Dut	ties and	Date Appointed	
Responsibilities	aria	Current Salary	
		Notice period	
		Reason for leaving	
		Name & Address of Curre	nt Employer
		Post Code	
REFERENCES (one of these sh	hould be your current o	or most recent employer)	
Name	Nam	ne	
Address	Add	ress	
Address	Add	ress	
Address Post Code		ress t Code	
	Pos		
Post Code	Pos Tele	t Code	
Post Code Telephone Number	Pos Tele Ema	t Code ephone Number	
Post Code Telephone Number Email Address	Pos Tele Ema Cap	t Code ephone Number ail Address	Yes \(No [

4. EDUCATION/TRAINING

Name of School/ College/ Training Provider	Dates		Outline of course	Qualifications	
	From	То	content	(including grades or levels)	

5. PREVIOUS WORK EXPERIENCE

Please enter earliest first and account for any gaps in employment. Any gaps or discrepancies will be explored at interview.

Name and Address of	d Address of Position Held and Summary	Pagan for logging	Dates		
Employer	of Duties/Responsibilities	Reason for leaving	From	То	

6. OTHER INFORMATION IN SUPPORT OF YOUR APPLICATION

Using the job description and person specification please demonstrate, using examples, your suitability for the job you are applying for.
Please state any dates/times in the next 6 weeks when you will not be available for interview
Please note that we will check on the identity of candidates, make overseas checks where relevant and follow up references with referees and scrutinise applications for gaps in employment.
I am / am not* related to any senior member of staff or Governor. If so, who?
I have / have not lived outside the United Kingdom for a period of 6 months or more in one country since my 18 th birthday. Please provide details of the relevant countries.
I understand that canvassing, directly or indirectly, will be a disqualification.
I am prepared to undergo a medical examination.
I can produce the original documents of my qualifications.
I understand that providing false information is an offence and, if I am appointed, could result in dismissal and referral to the police.
* Please delete as appropriate
Signature Date

All candidates applying electronically will be required to sign their form at interview.

APPLICANT'S DECLARATION & EQUAL OPPORTUNITIES MONITORING

As the role you have applied for involves frequent or regular contact with children, you are required to complete the self-disclosure. To allow us to monitor equal opportunities you are asked to complete the monitoring form.

All information you provide will be treated as confidential and managed in accordance with relevant data protection legislation and guidance.

Self Declaration

The information you provide below will only be seen by the panel should you be chosen as the preferred candidate for the post.

[T	
Position Applied For:		
Name:		
		1
Have you ever been know being a risk or potential risk	vn to any children's services department or to the police as sk to children?	Yes 🗌 No 🔲
,	ct of any disciplinary investigation and/or sanction by any erns about your behaviour towards children?	Yes 🗌 No 🔲
,	ons, cautions, reprimands or final warnings that are not the Rehabilitation of Offenders Act 1974 (Exceptions) Order	Yes 🗌 No 🗍
Are you disqualified from v regulatory body?	working with children or subject to sanctions imposed by a	Yes 🗌 No 🔲
If you have answered 'yes separate document.	s' to any of the above questions, please provide further details in	ı a
Confirmation of declarat	tion	
and I understand that an o	on provided may be processed in connection with recruitment pure offer of employment may be withdrawn or disciplinary action massed by me and subsequently come to the organisation's attentic	y be taken
	ganisation's procedures I agree to undergo a Criminal Records icate and consent to the organisation clarifying any information pagencies providing it.	
	nisation within 24 hours if I am subsequently investigated by any to concerns about my behaviour towards children or young peo	
supplied by third parties ma	nation contained on this form, the results of the DBS check and information by the organisation to other persons or organisations is considered necessary to safeguard children.	

Date ____

Signature ____

Equal Opportunities Monitoring Form

Signature _____

This information will be solely used for monitoring and statistical purposes, it will not be seen by those shortlisting or interviewing you. A copy of the School's Equal Opportunities Policy is available on request.

Position Applied For:					
Name:					
National Insurance no:					
Gender:	Male F	emale			
Date of Birth:					
Ethnic Origin:	Please tick the	e category th	nat most represents your	race and ethnicity	/
White, British			Black or Black British, A	frican	
White, Irish			Black or Black British, C		
	al				
Any other White Backgrou			Any other Black Backgro	ouna	
Asian or Asian British, Bar			Chinese		
Asian or Asian British, Ind			Mixed White & Asian		
Asian or Asian British, Pal			Mixed White & Black Afr	rican	
Any other Asian Backgrou	ınd		Mixed White & Black Ca	ribbean	
Any other Ethnic Backgrou	und		Any other Mixed Backgr	ound	
Do not wish to be recorde	d				
Religion/Religious Belief/Philosophical Belief:	Christian				
Disability:					
Do you have a disability within the terms of the Disability Discrimination Act 1995 (Defined as a physical or mental impairment which has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities)?					
Other Needs:					
	Is there anything else you think we need to take into account to Yes No least the N				
Where did you see the vacancy advertised?					

Date _____