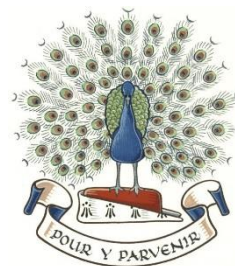


# LADY MANNERS SCHOOL

Shutts Lane, Bakewell, Derbyshire, DE45 1JA

Tel: 01629 812671 [www.ladymanners.net](http://www.ladymanners.net)



## CONFIDENTIAL APPLICATION FOR THE POST OF TEACHER OF PE (MATERNITY COVER)

Please complete in black ink

Job Reference  
Number

23/12

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](http://www.ladymanners.net/policies)

### 1. PERSONAL DETAILS

Surname		Forenames	
Previous Name / Maiden Name (if applicable)			
Title		DfE No. / GTC No.	
Address			
Post Code			
Home Telephone Number		Mobile Number	
Work Telephone Number		E-mail	

### 2. PRESENT POST

Present Post (Title)		Date Appointed	
		Point on Scale	
Name of School and Address			
Post Code			
Type of School	Age Range	No. on Roll	
Single Sex/Mixed	Age Range Taught		
Name of Education Authority or Private Institution			
Reason for Leaving			

### 3. REFERENCES (one of these should be your Headteacher)

Name	Name
Address	Address
Post Code	Post Code
Telephone Number	Telephone Number
Status	Status
Email	Email

#### 4. EDUCATION

##### Secondary Education

Qualification (e.g. GCSE/A-Level)	Subject	Grade	School / College	Date Awarded

##### Higher Education

Qualification	Subject	Grade	University / College	Date Awarded

##### Other post-graduate study

Qualification	Subject	University / Other Provider	Date Awarded

##### Teaching Qualification

Qualification	Subject	University / Other Provider	Date Awarded

##### Teaching subjects offered

Main Subject	Key Stage(s)
Other Subjects	Key Stage(s)

**5. QUALIFIED TEACHER INFORMATION**

Have you gained Qualified Teaching Status?

Yes ☐ No ☐

Date of gaining Qualified Teacher Status

DfES reference number

If you qualified after 7 May 1999, have you completed your induction year?

Yes ☐ No ☐

If yes, give date

If no, have you passed your skills tests?

Numeracy ☐ Literacy ☐ ICT ☐

If not, when do you expect to complete them?

**6. PREVIOUS TEACHING POSTS HELD** (please enter earliest first)

Name of Education Authority and status (Foundation / Community)	Name of School or College (including location)	B, G or Mixed	Roll No.'s	Age Range	Post Title and Scale	Dates		Reason for Leaving
						From	To	

**7. DETAILS OF ANY NON-TEACHING EMPLOYMENT** (including any breaks in service)

Employer	Position Held	Job Description	From	To	Reason for Leaving

**8. RELEVANT IN SERVICE TRAINING**

Title	Organising Body	Duration		Dates
		From	To	

**9. ACHIEVEMENTS WITHIN OR BEYOND SCHOOL**

**10. INTERESTS**

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 <sup>th</sup> birthday.
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.

<b>Position Applied For:</b>	Teacher of PE (Maternity Cover)
<b>Name:</b>	

Have you ever been known to any children's services department or to the police as being a risk or potential risk to children?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you been the subject of any disciplinary investigation and/or sanction by any organisation due to concerns about your behaviour towards children?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have any convictions, cautions, reprimands or final warnings that are not "protected" as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (Amended) 2013?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you disqualified from working with children or subject to sanctions imposed by a regulatory body?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If you have answered 'yes' to any of the above questions, please provide further details in a separate document.	
<b>Confirmation of declaration</b>	
I agree that the information provided may be processed in connection with recruitment purposes and I understand that an offer of employment may be withdrawn or disciplinary action may be taken if information is not disclosed by me and subsequently come to the organisation's attention.	
In accordance with the organisation's procedures I agree to undergo a Criminal Records Check, provide a valid DBS certificate and consent to the organisation clarifying any information provided on the disclosure with the agencies providing it.	
I agree to inform the organisation within 24 hours if I am subsequently investigated by any agency or organisation in relation to concerns about my behaviour towards children or young people.	
I understand that the information contained on this form, the results of the DBS check and information supplied by third parties may be supplied by the organisation to other persons or organisations in circumstances where this is considered necessary to safeguard children.	

Signature \_\_\_\_\_

Date \_\_\_\_\_

## Equal Opportunities Monitoring Form

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.

<b>Position Applied For:</b>	Teacher of PE (Maternity Cover)		
<b>Name:</b>			
<b>National Insurance no:</b>			
<b>Gender:</b>	Male <input type="checkbox"/> Female <input type="checkbox"/>		
<b>Date of Birth:</b>			
<b>Ethnic Origin:</b>	Please tick the category that most represents your race and ethnicity		
White, British	<input type="checkbox"/>	Black or Black British, African	<input type="checkbox"/>
White, Irish	<input type="checkbox"/>	Black or Black British, Caribbean	<input type="checkbox"/>
Any other White Background	<input type="checkbox"/>	Any other Black Background	<input type="checkbox"/>
Asian or Asian British, Bangladeshi	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
Asian or Asian British, Indian	<input type="checkbox"/>	Mixed White & Asian	<input type="checkbox"/>
Asian or Asian British, Pakistani	<input type="checkbox"/>	Mixed White & Black African	<input type="checkbox"/>
Any other Asian Background	<input type="checkbox"/>	Mixed White & Black Caribbean	<input type="checkbox"/>
Any other Ethnic Background	<input type="checkbox"/>	Any other Mixed Background	<input type="checkbox"/>
Do not wish to be recorded	<input type="checkbox"/>		
<b>Religion/Religious Belief/Philosophical Belief:</b>	Christian <input type="checkbox"/> Muslim <input type="checkbox"/> Hindu <input type="checkbox"/> Jew <input type="checkbox"/> Sikh <input type="checkbox"/> Buddhist <input type="checkbox"/> Humanist <input type="checkbox"/> Atheist <input type="checkbox"/> None <input type="checkbox"/> Other <input type="checkbox"/> Specify.....		
<b>Disability:</b>			
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)?			Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Other Needs:</b>			
Is there anything else you think we need to take into account to deal with you fairly and equally?			Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please state below.
<b>Where did you see the vacancy advertised?</b>			

Signature \_\_\_\_\_

Date \_\_\_\_\_