

**Application for employment:**

**Support Staff**

**Instructions**

* Please use Microsoft Word to fill in this application form. The boxes will expand as you type.
* Email the completed application form to recruitment@westhouseprep.com along with a covering letter (if required).
* Contact the Human Resources department if you would like any more information or guidance.

**Data Protection**

The information that you provide on this form will be used to process your application for employment. The personal information 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 are set out in the school’s Privacy Notices and Data Protection Policy. If you succeed in your application and take up employment with the 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.

|  |
| --- |
| **Application for the post of:** |
| Role title: |  |

|  |
| --- |
| **Personal Details** |
| Title: |  |
| Forename(s): |  |
| Surname: |  |
| Any previous names: |  |
| Do you have the right to work in the UK?  | Yes [ ]  | No [ ]  |
| Address and Postcode: |  |
| Previous addresses:(If resident at current address for less than five years, please provide all previous addresses during this period) |  |
| Mobile telephone: |  |
| Other telephone: |  |
| Email address: |  |
| National Insurance number: |  |
| Current pension scheme (if applicable): |  |
| Do you have a valid UK driving licence? | Yes [ ]  | No [ ]  |

|  |
| --- |
| **Qualifications and Educational History (most recent first)** |
| Year ofQualification | Qualification | Subject(s) | Grade/Level | School/College/University | Full/Part Time |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

|  |
| --- |
| **Other relevant training (most recent first)** |
| Training/Course Title | Organising Body | Duration | Month/YearCompleted |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| **Current/most recent employment** |
| Employer Name and Address: |  |
| Post Title: |  |
| MainDuties/Responsibilities: |  |
| Full/Part Time: |  |
| Salary/Wage: |  |
| Start date: |  |
| Leaving date (if applicable): |  |
| Period of Notice Required: |  |
| Reason for leaving: |  |

|  |  |
| --- | --- |
| **Previous employment (most recent first)**Please cover all employment since leaving full-time education |  |
| Employer Name and Address: | Post Title and MainDuties/Responsibilities | Full/PartTime: | From/To(mth/yr): | Reason for leaving: |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |
| --- | --- |
| **Other useful experience**E.g. voluntary work, family care, study etc | Dates |
|  |  |
|  |  |
|  |  |
|  |  |

|  |  |
| --- | --- |
| **Gaps in employment**Please provide details of any gaps in your employment history | Dates |
|  |  |
|  |  |
|  |  |
|  |  |

|  |
| --- |
| **Personal Statement**Please give your reasons for making this application relating your qualifications, experience and personal attributes. You may also wish to relate your own leisure and spare time interests. If necessary, please continue on a separate sheet and attach it to this form. |
|  |

|  |
| --- |
| **References**Please give details of two referees, one of whom should be your **present/most recent employer**, and one of whom must also be your employer where you **last worked with children** (if applicable).Please note: No appointment will be made without taking up both references. |
| **1st referee (current/most recent employer)** | **2nd referee** |
| Title |  | Title |  |
| Name |  | Name |  |
| Role title: |  | Role title: |  |
| Name and Address of Organisation: |  | Name and Address of Organisation: |  |
| Contact number: |  | Contact number: |  |
| Contact email: |  | Contact email: |  |
| Their relationship to you: |  | Their relationship to you: |  |
| Contact prior to interview? | Yes [ ]  | No [ ]  | Contact prior to interview? | Yes [ ]  | No [ ]  |

|  |
| --- |
| **Existing contacts within school**Please indicate if you know any current employees or governors at the School and if so how you know them. |
|  |

|  |
| --- |
| **Declaration** |
| West House School is committed to the safeguarding and protection of children. All appointments are made in accordance with the School’s Child Protection Safeguarding Policy.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 appointment will be made conditional on obtaining 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 receive an application from a disqualified person;
* We are provided with false information in, or in support of, an applicant’s application; or
* We have serious concerns about an applicant’s suitability to work with children.

The post for which you are applying is one for which you are obliged to declare all convictions, cautions, reprimands and final warnings, as defined by the Rehabilitation of Offenders Act 1974. If you are shortlisted for an interview, you will be required to complete a self-declaration of your criminal record or information that would make you unsuitable to work with children.I declare that the information given on this form is, to the best of my knowledge, true and complete and I understand that any false information may be sufficient cause for rejection or, if employed, dismissal without notice. I also confirm that I am not on any Barred Lists or otherwise disqualified from working with children. I further authorise the Governors to obtain references to support this application and release the Governors and referees from any liability caused by giving and receiving information. I agree that the information given on this form may be used for registered purposes under General Data Protection Regulations. I understand that canvassing or giving false information will disqualify my application. Signed: Date:  |

|  |
| --- |
| **Equal Opportunities Monitoring Form and Policy**West House School is committed to bringing about equal opportunities in its employment.Please complete and return our Equal Opportunity Monitoring Form. It will be kept separately and used only to monitor the effectiveness of our Equal Opportunity Policy. |
| We are committed to equality of opportunity and positive action to promote equality of opportunity. We believe that an Equal Opportunities Policy helps to ensure that there is no unjustified discrimination in the recruitment, retention, training and development of staff grounds of age, disability, gender reassignment, marriage or civil partnership, pregnancy and maternity, race, which includes colour, nationality and ethnic or nation origins, religion or belief, sex or sexual orientation. These are known as protected characteristics.We also believe that an Equal Opportunities Policy benefits employees and potential employees and helps achieve dignity at work and contributes to providing the best possible education for pupils and parents.West House School strives to operate a policy of equal opportunity and not discriminate against any person. To help us monitor our effectiveness as an equal opportunities employer, will you please provide the details below by ticking the appropriate boxes. **This information will only be used for this purpose.** |

|  |
| --- |
| **Role applied for** |
|  |

|  |
| --- |
| **Sex** |
| Male [ ]  | Female [ ]  | Prefer not to say [ ]  |

|  |
| --- |
| **Age** |
| 16-24 [ ]  | 25-30 [ ]  | 31-40 [ ]  | 41-50 [ ]  | 51-65 [ ]  | Over 65 [ ]  |

|  |
| --- |
| **Nationality** |
| What is your nationality? |  |
| Do you require a Work Permit? | Yes [ ]  | No [ ]  |

|  |
| --- |
| **Ethnic Origin and Cultural Background**How would you describe your ethnicity? |
| **White** | **Mixed** |
| British | [ ]  | White and Black Caribbean | [ ]  |
| English | [ ]  | White and Black African | [ ]  |
| Irish | [ ]  | White and Asian | [ ]  |
| Scottish | [ ]  | Other Mixed background | [ ]  |
| Welsh | [ ]  |  |  |
| Gypsy/Traveller | [ ]  |  |  |
| Other White background | [ ]  |  |  |
| **Asian or Asian British** | **Black or Black British** |
| Pakistani | [ ]  | Caribbean | [ ]  |
| Bangladeshi | [ ]  | African | [ ]  |
| Chinese | [ ]  | Other Black background | [ ]  |
| Indian | [ ]  |  |  |
| Other Asian background | [ ]  | **Other ethnic group** |  |
|  |  | Arab | [ ]  |
|  |  | Other ethnic group | [ ]  |
|  |  |  |  |
|  |  | **Prefer not to say** | [ ]  |
|  |  |  |  |

|  |
| --- |
| **Religion or Belief** |
| Buddhist | [ ]  | Agnostic | [ ]  |
| Christian | [ ]  | Atheist | [ ]  |
| Hindu | [ ]  | No religion | [ ]  |
| Jewish | [ ]  | Other | [ ]  |
| Muslim | [ ]  | Prefer not to say | [ ]  |
| Sikh | [ ]  |  |  |

|  |
| --- |
| **Transgender** |
| Do you currently live or plan to live in the gender opposite to your gender at birth: | Yes [ ]  | No [ ]  | Prefer not to say [ ]  |

|  |
| --- |
| **Sexual Orientation** |
| Heterosexual | [ ]  |
| Gay man | [ ]  |
| Gay woman/lesbian | [ ]  |
| Bisexual | [ ]  |
| Other | [ ]  |
| Prefer not to say | [ ]  |

|  |
| --- |
| **Disability** |
| The equality Act 2010 defines disability as a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out your normal day-to-day activities which has lasted, or is expected to last, at least 12 months. Alternatively, some conditions, such as severe disfigurement, a diagnosis of cancer, HIV infection, multiple sclerosis or a progressive condition, are also covered under the Act. Please answer the following questions to help us make reasonable adjustments to address your needs for support to overcome barriers in the workplace. |
| Do you consider yourself to have a disability or long-term health condition? | Yes [ ]  | No [ ]  | Prefer not to say [ ]  |
| If yes, which of the following apply to you? (you can select more than one) |
| Blind or visual impairment  | [ ]  | Mobility  | [ ]  |
| Deaf or hearing impairment | [ ]  | Physical Impairment  | [ ]  |
| Learning Difficulty  | [ ]  | Other disability  | [ ]  |
| Mental Health Condition  | [ ]  | None of these  | [ ]  |
| Prefer not to say | [ ]  |
| To ensure we offer you a fair recruitment process, please tell us whether you require any reasonable adjustment should you be invited to interview: | Yes [ ]  | No [ ]  |
| If yes, please provide details. We will endeavour to provide access, equipment or other practical support to ensure that applicants attending interviews are not unfairly disadvantaged. |
| Details of reasonable adjustments: |

|  |
| --- |
| **I hereby declare that the information provided on all parts of this form is correct.** |
| Signature: |  | Date: |  |