

Application For:- Schools Support Staff Only Appendix 9 (i)



School/Service Area:
Job Title:
Position Number:
Closing date:
Contact Number:

Applicant's Number
(For office use only)



PART 1

**Application for
Employment**

CONFIDENTIAL

Before completing please ensure that you refer to the guidance contained in the 'Information for Applicants'.

Personal Details		
Title (Mrs,Mr,etc.):	First/Other Names:	Address:
Surname/Family Name:		Post Code:
Previously known as:		National Insurance No.:
Do you require a work permit? Yes <input type="checkbox"/> No <input type="checkbox"/>		Preferred Contact Tel No: (Work/home/mobile)
If you already hold a work permit when does it expire? / /		E-mail address*
*If an e-mail address is provided this will be our preferred method of communication.		

General Information	
Are you related to a Councillor, Manager/Senior Officer of the Council, or Headteacher/any member of the Governing Body of the School you are applying? If "Yes" give Name, Position and Relationship.	Yes <input type="checkbox"/> No <input type="checkbox"/>
If you are successful will this be your only job? If "No" state weekly hours and nature of additional work.	Yes <input type="checkbox"/> No <input type="checkbox"/>
What period of notice are you required to give? AND/OR What is the earliest date could you start, if offered the job?	

References

Please give details of two referees. **One must be your current or if currently unemployed, your most recent employer**, and should not be a family member unless they are either your current or previous employer.

If you do not currently work with children or (vulnerable) adults but have done so in the past, you must provide a reference from your most recent employer who employed you to work with children or (vulnerable) adults.

If you have never been employed, please give details of two people who know you well, but are not family members, such as community or voluntary group members/leaders.

Current or most recent employer

Name:

Organisation and Position:

How do you know this person?

Address:

Post Code:

Tel:

E-mail address*:

Second Reference

Name:

Organisation and Position:

How do you know this person?

Address:

Post Code:

Tel:

E-mail address*:

***If an e-mail address is provided this will be our preferred method of communication.**

References are requested for all short-listed candidates prior to interview.

Declaration

In submitting this application (whether signed or not) I declare that I am the person referred to on the form and that the information I have given in all parts of this application is true, complete and correct and authorise Hull City Council to contact any current or former employers at the appropriate stage to confirm the details provided.

I understand that canvassing (seeking support from) any Councillor or Manager/Senior Officer of Hull City Council or Headteacher/School Governor in connection with this appointment or knowingly not stating such a relationship will disqualify me.

I understand that if I give incorrect information or a false statement this will lead to the withdrawal of any job offer, or if I am given the job this will result in disciplinary proceedings likely to result in my dismissal from the employment.

In accordance with the Immigration, Asylum and Nationality Act 2006 I am entitled to work in the United Kingdom. I shall produce such original documentation as you shall request to evidence my right to work.

I also agree to the information contained in this application being processed under the Data Protection Act, 1998, for the purposes specified on page four of this form, for statutory returns and in relation to forming any contract of employment.

Signed: _____

Date: _____

IMPORTANT: You must complete all parts of the application form. We do not normally accept C.V.s either on their own, or if sent with an application form.

Hull City Council operates a **NO Smoking** at work policy

Equal Opportunities in Employment – Monitoring Form

IMPORTANT: Please read the notes on the following page before completing. This form is not part of the selection process. Please complete in full.

General:	What is your ethnic group?
How did you first find out about this job, where did you see the job advertised?	a) White <i>Please tick</i>
	British <input type="checkbox"/>
	Irish <input type="checkbox"/>
	Any other White background <input type="checkbox"/> <i>(please give details)</i>
Current employment status:	b) Mixed <i>Please tick</i>
Are you currently in paid work?	White and Black Caribbean <input type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	White and Black African <input type="checkbox"/>
If no, how long have you been unemployed?	White and Asian <input type="checkbox"/>
Less than 6 months <input type="checkbox"/>	Any other Mixed background <input type="checkbox"/> <i>(please give details)</i>
Between 6 and 18 months <input type="checkbox"/>	c) Asian or Asian British <i>Please tick</i>
More than 18 months <input type="checkbox"/>	Indian <input type="checkbox"/>
Do you have sole responsibility for a child under 16? Yes <input type="checkbox"/> No <input type="checkbox"/>	Pakistani <input type="checkbox"/>
Would this job be a promotion? Yes <input type="checkbox"/> No <input type="checkbox"/>	Bangladeshi <input type="checkbox"/>
Do you work for Hull City Council? Yes <input type="checkbox"/> No <input type="checkbox"/>	Chinese <input type="checkbox"/>
What is your gender?	Any other Asian background <input type="checkbox"/> <i>(please give details)</i>
Male <input type="checkbox"/> Female <input type="checkbox"/>	d) Black or Black British <i>Please tick</i>
Is your gender identity the same as the gender you were assigned at birth? Yes <input type="checkbox"/> No <input type="checkbox"/>	Caribbean <input type="checkbox"/>
What is your date of birth?	African <input type="checkbox"/>
	Any other Black background <input type="checkbox"/> <i>(please give details)</i>
Do you consider yourself to be disabled?*	e) Other Ethnic Group <i>Please tick</i>
Yes <input type="checkbox"/> No <input type="checkbox"/>	Arab <input type="checkbox"/>
<i>(*see definition of disability on the following page)</i>	Gypsy/Romany/Irish Traveller <input type="checkbox"/>
	Any other <input type="checkbox"/> <i>(please give details)</i>
Application form submission:	What is your sexual orientation?
Please complete all parts of this application form and submit it by the closing date stated in the advert.	Bisexual <input type="checkbox"/> Heterosexual/straight <input type="checkbox"/>
Mrs R M Davies Oakfield School Hopewell Road Hull HU9 4HD	Gay man <input type="checkbox"/> Prefer not to say <input type="checkbox"/>
Application queries: Tel: (01482) 854588	Gay woman/Lesbian <input type="checkbox"/> Other <input type="checkbox"/>
	What is your religion or belief?
	Buddhist <input type="checkbox"/> Christian <input type="checkbox"/>
	Hindu <input type="checkbox"/> Jewish <input type="checkbox"/>
	Muslim <input type="checkbox"/> Sikh <input type="checkbox"/>
	None <input type="checkbox"/> Prefer not to say <input type="checkbox"/>
	Any other religion or belief <input type="checkbox"/> <i>(please give details)</i>

Monitoring Form Guidance

What are we trying to achieve?

Hull City Council is fully committed to achieving fairness and equality in employment and seeks to achieve a workforce which reflects the diversity of the community it serves. No job applicant or employee will be treated less favourably or disadvantaged, either directly or indirectly, on the grounds of gender, gender identity, nationality or ethnic origin, disability, religion or belief, sexual orientation, age, marriage or civil partnership and pregnancy or maternity or any other unjustifiable reason.

Why do we ask for information?

Our recruitment and selection policies and procedures are reviewed regularly to ensure that all applicants are selected according to their merits and abilities. We use the information to check to what extent the people who apply to us for jobs, or who get jobs with us, are representative of the local community. This in turn helps us to judge whether our recruitment processes are fair and equally open regardless of background. Monitoring helps us to develop future initiatives and to overcome discrimination. It is, therefore, important that you complete the monitoring form in full.

Local Employment Partnership

As part of the Local Employment Partnership with Jobcentre Plus we wish to record unemployed applicants, such as individuals in receipt of incapacity benefit, lone parent benefit or jobseekers allowance.

What happens to the form?

The form will be separated from your application and will not be passed on to anyone involved in short-listing, selection or appointment for the job for which you are applying. It will be stored securely and confidentially. If you are unsuccessful this will be stored for a period of one year and then confidentially destroyed. Should you be successful the data will be held on your personal file and electronically for future workforce monitoring purposes.

Disabled Applicants

Under the Equality Act 2010, a disability is defined as a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities.

Applicants invited to interview will be asked to let us know of any reasonable adjustments which are needed to ensure the interview is accessible.

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PART 2

**Application for
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Details of present or (if unemployed) your last job

Please read the person specification. This part of the application form will be used to assess how you meet the requirements for the job.

Are you currently unemployed? Yes No

If yes, please give your reason(s) for leaving:

Name and Address of Employer and contact details	Job Title:	
	Grade:	Employed in this job
	Salary:	From: To:

Give a brief description of your present, or (if unemployed) your last job:

Details of all previous employment

Please read the person specification. This part of the application form will be used to assess how you meet the requirements for the job. Start with your most recent job (please give reasons if there are periods when you haven't worked).

Name and address of employer and contact details	Job title	Salary/Grade	Dates employed		Brief job details	Reason for Leaving
			From	To		

Important: Continue any section on a separate sheet if necessary but please ensure that your National Insurance number is entered on the top right of the sheet. **Do not put your name on continuation sheets. You must complete all parts of the form.**

Relevant skills, qualifications & training

Please give details of qualifications obtained and training received which are relevant to the job for which you are applying (**refer to the person specification**).

The Council has access to **UK NARIC** which is a national agency and the official source of information and advice on the comparability of international qualifications from over 180 Countries worldwide with those in the United Kingdom. The Council will therefore obtain comparability guidance if your qualification was obtained overseas.

Educational and Vocational Qualifications	Level	Grade	Date Obtained
Professional Qualifications/Membership of Professional Bodies	Grade/Class		Date Obtained
Relevant Training and Development (Specify valid dates for statutory training e.g. first aid)			Date

Driving licence/car/motorcycle ownership

This section need only be completed if driving is mentioned in the person specification as an essential requirement of the job. Please tick the appropriate box.

Do you have you a full current driving licence?

Yes

No

Do you have full access to a car/ motorcycle?

Car

Yes

No

M/c

Yes

No

If you have any current penalty points please give details in the space below:

Personal Statement

Please state why you think you are suitable for this job.

Please describe what relevant qualities you can bring to this job. It is important that you refer to the Person Specification for the position you are applying for, giving both work and non-work examples as appropriate, as to how you meet the requirements of the job.

Relevant Experience:

Skills:

Knowledge:

Interpersonal/Communication Skills:

Further information to support your application:

Important: Continue any section on a separate sheet if necessary but please ensure that your National Insurance number is entered on the top right of the sheet. **Do not put your name on continuation sheets. You must complete all parts of the form.**

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PART 3

**Application for
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CRIMINAL RECORD INFORMATION

IMPORTANT – Please read carefully

Please read the Disclosure of Criminal Record Information Sheet attached to the person specification before answering the following questions.

Do you have any criminal record information that the Council requires you to disclose?
 Yes No

If "Yes", please give details in the appropriate sections(s) below:

UNSPENT CONVICTIONS

Nature of Offence	Date of Offence	Sentence/ Order	Date of Sentence/ Order	Location of Court	Full name at time of Offence/ Sentence/Order*

PROSECUTIONS PENDING – You only need to complete this section if the job for which you are applying requires a Standard or Enhanced Disclosure

Nature of Alleged Offence	Date of Alleged Offence	Court Date (if known)	Location of Court	Full name at time of Alleged Offence*

SPENT CONVICTIONS (including cautions, reprimands and final warnings) - You only need to complete this section if the job for which you are applying requires a **Standard or Enhanced Disclosure**

Nature of Offence	Date of Offence	Sentence/ Order	Date of Sentence/ Order	Location of Court	Full name at time of Offence/ Sentence/Order*

DISQUALIFICATION ORDER – You only need to complete this section if the job for which you are applying requires a **Standard or Enhanced Disclosure**

Are you the subject of a Disqualification Order? Yes No

If 'Yes', please give details below:

Nature of Offence	Date of Offence	Date of Order	Location of Court	Full name at time of Offence/ Order*

GOVERNMENT DEPARTMENT LISTS e.g. DBS Children's Barred List or DBS Adults Barred List. You only need to complete this section if the job for which you are applying requires a **Standard or Enhanced Disclosure with a Barred List/s Check.**

Nature of Offence/Reason for Inclusion on the List	Date of Offence	Date of Inclusion on List	Name of List (e.g. Children's or Adults Barred List)	Full name at the time of the Offence/ Inclusion on List(s)*

*if different from the name you are using now

Declaration

In submitting this application (whether signed or not), **I declare** that I have read the Disclosure of Criminal Record Information Sheet attached to the Person Specification. I have provided all the information required by the Council for the job for which I am applying.

Signed:

Date: