

St Mary's Lane Hertingfordbury Herts SG14 2LX

Tel: 01992 581378

# TEACHER APPLICATION FORM

#### **IMPORTANT:**

Please complete this form in BLACK ink or TYPE. Please complete every section, using a continuation sheet if you need more space for any replies. The School operates an equal opportunity policy to ensure that all people who apply for posts receive equal treatment in employment regardless of their age, sex, marital status, disability, sexual orientation, race, creed, colour, ethnic or national origin.

APPLICATION FOR THE POSITION OF:	

#### 1. PERSONAL DETAILS:

FIRST NAMES: ADDRESS:  DATE OF BIRTH NATIONAL INSURANCE NO. CURRENT SALARY AS A TEACHER (excluding responsibility allowance) DFE REFERENCE NUMBER: DATE OF QUALIFICATION AS A TEACHER: TYPE OF TEACHER TRAINING: SECONDARY/PRIMARY (NURSERY, INFANT, JUNIOR) HAVE YOU SUCCESSFULLY COMPLETED YOUR PROBATIONARY YEAR? STATE SUBJECTS YOU ARE QUALIFIED TO TEACH:	SURNAME:		HOME TELEPHONE NO:	
DATE OF BIRTH  NATIONAL INSURANCE NO.  CURRENT SALARY AS A TEACHER (excluding responsibility allowance)  DFE REFERENCE NUMBER:  DATE OF QUALIFICATION AS A TEACHER:  TYPE OF TEACHER TRAINING: SECONDARY/PRIMARY (NURSERY, INFANT, JUNIOR)  HAVE YOU SUCCESSFULLY COMPLETED YOUR PROBATIONARY YEAR?  YES/NO	FIRST NAMES:		MOBILE NO:	
NATIONAL INSURANCE NO.  CURRENT SALARY AS A TEACHER (excluding responsibility allowance)  DFE REFERENCE NUMBER:  DATE OF QUALIFICATION AS A TEACHER:  TYPE OF TEACHER TRAINING: SECONDARY/PRIMARY (NURSERY, INFANT, JUNIOR)  HAVE YOU SUCCESSFULLY COMPLETED YOUR PROBATIONARY YEAR?  YES/NO	ADDRESS:			
NATIONAL INSURANCE NO.  CURRENT SALARY AS A TEACHER (excluding responsibility allowance)  DFE REFERENCE NUMBER:  DATE OF QUALIFICATION AS A TEACHER:  TYPE OF TEACHER TRAINING: SECONDARY/PRIMARY (NURSERY, INFANT, JUNIOR)  HAVE YOU SUCCESSFULLY COMPLETED YOUR PROBATIONARY YEAR?  YES/NO				
NATIONAL INSURANCE NO.  CURRENT SALARY AS A TEACHER (excluding responsibility allowance)  DFE REFERENCE NUMBER:  DATE OF QUALIFICATION AS A TEACHER:  TYPE OF TEACHER TRAINING: SECONDARY/PRIMARY (NURSERY, INFANT, JUNIOR)  HAVE YOU SUCCESSFULLY COMPLETED YOUR PROBATIONARY YEAR?  YES/NO				
NATIONAL INSURANCE NO.  CURRENT SALARY AS A TEACHER (excluding responsibility allowance)  DFE REFERENCE NUMBER:  DATE OF QUALIFICATION AS A TEACHER:  TYPE OF TEACHER TRAINING: SECONDARY/PRIMARY (NURSERY, INFANT, JUNIOR)  HAVE YOU SUCCESSFULLY COMPLETED YOUR PROBATIONARY YEAR?  YES/NO				
NATIONAL INSURANCE NO.  CURRENT SALARY AS A TEACHER (excluding responsibility allowance)  DFE REFERENCE NUMBER:  DATE OF QUALIFICATION AS A TEACHER:  TYPE OF TEACHER TRAINING: SECONDARY/PRIMARY (NURSERY, INFANT, JUNIOR)  HAVE YOU SUCCESSFULLY COMPLETED YOUR PROBATIONARY YEAR?  YES/NO				
NATIONAL INSURANCE NO.  CURRENT SALARY AS A TEACHER (excluding responsibility allowance)  DFE REFERENCE NUMBER:  DATE OF QUALIFICATION AS A TEACHER:  TYPE OF TEACHER TRAINING: SECONDARY/PRIMARY (NURSERY, INFANT, JUNIOR)  HAVE YOU SUCCESSFULLY COMPLETED YOUR PROBATIONARY YEAR?  YES/NO				
CURRENT SALARY AS A TEACHER (excluding responsibility allowance)  DFE REFERENCE NUMBER:  DATE OF QUALIFICATION AS A TEACHER:  TYPE OF TEACHER TRAINING: SECONDARY/PRIMARY (NURSERY, INFANT, JUNIOR)  HAVE YOU SUCCESSFULLY COMPLETED YOUR PROBATIONARY YEAR?  YES/NO	DATE OF BIRTH			
DFE REFERENCE NUMBER:  DATE OF QUALIFICATION AS A TEACHER:  TYPE OF TEACHER TRAINING: SECONDARY/PRIMARY (NURSERY, INFANT, JUNIOR)  HAVE YOU SUCCESSFULLY COMPLETED YOUR PROBATIONARY YEAR?  YES/NO	NATIONAL INSURA	NCE NO.		
DATE OF QUALIFICATION AS A TEACHER:  TYPE OF TEACHER TRAINING: SECONDARY/PRIMARY (NURSERY, INFANT, JUNIOR)  HAVE YOU SUCCESSFULLY COMPLETED YOUR PROBATIONARY YEAR?  YES/NO	CURRENT SALARY	'AS A TEACHER (excluding re	esponsibility allowance)	
TYPE OF TEACHER TRAINING: SECONDARY/PRIMARY (NURSERY, INFANT, JUNIOR) HAVE YOU SUCCESSFULLY COMPLETED YOUR PROBATIONARY YEAR? YES/NO	DFE REFERENCE I	NUMBER:		
INFANT, JUNIOR) HAVE YOU SUCCESSFULLY COMPLETED YOUR PROBATIONARY YEAR? YES/NO	DATE OF QUALIFIC	CATION AS A TEACHER:		
HAVE YOU SUCCESSFULLY COMPLETED YOUR PROBATIONARY YEAR? YES/NO	TYPE OF TEACHER	R TRAINING: SECONDARY/PI	RIMARY (NURSERY,	
	INFANT, JUNIOR)			
STATE SUBJECTS YOU ARE QUALIFIED TO TEACH:	HAVE YOU SUCCE	SSFULLY COMPLETED YOU	R PROBATIONARY YEAR?	YES/NO
	STATE SUBJECTS	YOU ARE QUALIFIED TO TE	ACH:	

#### Warning

As this post is classed as having substantial access to children, appointment will be subject to a police check of any previous convictions. The school is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.

# 2. POST 18 EDUCATION AND TRAINING:

Please give information about all education received in the country or abroad and qualifications obtained including degrees with class and division and Teacher's Certificates.

#### 2.1 UNIVERSITY DEGREE

Establishment Attended	Full-time or Part-time	Qualifications (indicate	Dates attended	Date of final exam	
		Class and Division)	From	То	

# 2.2 TEACHING QUALIFICATION

Establishment Attended	Full-time or Part-time	Qualifications (indicate	Dates attended		Date of final exam
		Class and Division)	From	То	

# 2.3 OTHER QUALIFICATIONS, FULL OR PART-TIME STUDY

Establishment Attended	ent Full-time or Part-time	Qualifications (indicate	Dates attended		Date of final exam
		Class and Division)	From	То	

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3. EMP	LOYMENT RECOR	<b>D</b>						
finishing wit	details of all previou th your present post which you consider	and pleas	e give fu	rther detail	s and any	other		
3.1 TEAC	CHING:							
Education Authority or Employer	Name and Type of School or institution (Please state whether Nursery,	Age Range Single Sex or Mixed	Approx No. on Roll/or School	Post Held And Salary Grade	Full- Time or Part-	Reason for Leaving	Dates	
	Primary, Secondary, Comprehensive, Selective etc)	Of Wilked	Group		Time		From	То

# 3.2 NON-TEACHING: (Please include all paid and unremunerated activity inc. family related break in service)

Employer (if appropriate)	Post Title	Brief Description of Activity/Responsibility Or Duties		Full- Time or Part- Time	Dates	То	

4. ADVERTI	ISEMENT:
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Please state where you saw this vacancy:

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# 5. REFERENCES:

Please nominate two referees (unless stated otherwise in the details of the post). If in employment one referee should be your present employer.

NAME:	NAME:
DESIGNATION	DESIGNATION
100000	1000000
ADDRESS	ADDRESS
TELEPHONE NO.	TELEPHONE NO.

Do you agree to your present employer being contacted concerning this application? **YES / NO** 

# 6. REHABILITATION OF OFFENDERS ACT 1974

For ALL posts within this school you are required before appointment to disclose any conviction, caution or binding over including "spent convictions", under the terms of the Rehabilitation of Offenders Act 1974 (Exemptions) Order 1975.

Disclosure will only be required if following interview it is considered that you are the most suitable applicant for the post.

#### 7. STATEMENT

I can confirm that I am not on List 99 or disqualified from working with children.

To the best of my knowledge and belief the information contained in this form is accurate.

Signature:	
Date:	

#### Please note:

Following successful interview you will be asked to complete a Medical History Questionnaire.