CONFIDENTIAL



TEACHER APPLICATION FORM

(Before completing this form please read Notes to Applicants)

NAME OF CANDIDATE:

TO BE USED FOR THE FOLLOWING TEACHING POSITIONS ONLY:-

Lead Practitioner

Fast Track Teacher

Teacher

Newly Qualified Teacher

Unqualified Teacher

Instructor

Please use the latest version of this application form which can be downloaded from the Catholic Education Service website: www.catholiceducation.org.uk

BEFORE YOU BEGIN PLEASE CHECK THAT YOU HAVE THE FOLLOWING:-

- 1. Application Form
- 2. Notes to Applicants
- 3. Recruitment Monitoring Form
- 4. Rehabilitation of Offenders Act 1974 Disclosure Form

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PLEASE DO NOT RETURN ANY COMPLETED APPLICATION FORMS AND/OR SUPPLEMENTARY DOCUMENTS TO THE CATHOLIC EDUCATION SERVICE. PLEASE RETURN ALL COMPLETED APPLICATION FORMS AND/OR SUPPLEMENTARY DOCUMENTS TO THE SCHOOL/COLLEGE WHERE THE POSITION APPLIED FOR IS BASED, OR AS INSTRUCTED IN THE DETAILS OF THE POST.

DETAILS OF ROLE APPLIED FOR

Application for the position	on of:						
Full Time:	Part Time:	Job Share:					
At:			VA School / Voluntary Academy				
At which the Governing B In the Local Authority of:	ody / Academy Trust Co	mpany is the em	ployer of staff				
In the Archdiocese/Dioce	In the Archdiocese/Diocese of:						
Please state where (or ho	ow) you first learned of th	nis vacancy:					

1. APPLICANT'S PERSONAL DETAILS

1.1 1.1.1	Title:		
1.1.2	Surname:	1.1.3	First Name(s):
1.1.4	Known as (if applicable):	1.1.5	Any former name(s):
1.1.6	Religious Denomination/Faith:		
1.1.7	Address:		
1.1.8	If you have lived at this address for less thave lived during this period with dates:	ın 5 years, p	lease list all other addresses at which
you na	Address		Dates
	7.10.00		
1.1.9	Telephone numbers:		
Home:	Mobile:		Work:
1.1.10	Email Address:		
1.2	How do you prefer to be contacted?		
1.3	National Insurance No.:		
		1 5	Da vay have Qualified Teach or
1.4	DfE Teacher Reference No.:	1.5	Do you have Qualified Teacher Status ("QTS")?
1.6	QTS Certificate No.:	1.7	Date of qualification as a Teacher:
1.8	GTC (Wales only) or other Membership No.	:	

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2. DETAILS OF APPLICANT'S PRESENT EMPLOYMENT

2.1	Are you presently employed? Yes No
If no, p	lease proceed to the next section.
2.2	Details of Present Post
2.2.1	Role:
At	School/College
2 2 2	
2.2.2	Address:
2.2.3	Telephone No.:
2.2.4	Local Authority:
2.2.5	Diocese:
2.2.6	Permanent: Temporary:
2.2.7	Full time: Part time: Job Share:
2.2.8	Date of Appointment:
2.2.9	Notice Required:
2.2.10	Probationary Period/NQT Induction year completed? If so, please provide date:
2.2.11 applica	Description of key duties/responsibilities (including subjects and key stages taught (if
2.2	
2.3	Please provide the following information relating to present salary and scale:
2.3.1	Salary scale (e.g. Main/Upper/Leadership):
2.3.2	Group of School/Number on roll: 2.3.3 Spine Point:
2.3.4	Additional Allowances (including Inner/Outer/Fringe London):
2.3.5	Gross annual salary:

3. APPLICANT'S EMPLOYMENT HISTORY AND PROFESSIONAL EXPERIENCE

Please complete in chronological order,	starting wit	h the most r	ecent:		
Full name and address of school/ institution (state whether Nursery/ Primary/ Secondary/ Comprehensive/ Selective etc)	Approx size of roll	Age range taught & Single sex/	Post held and responsibilities including subjects and key stages taught	Dates employed Month/ Year	Reason for Leaving
(include local authority if relevant)		mixed		- To	
				-	
				-	
				-	
				-	
				-	
				-	

4. OTHER EMPLOYMENT/WORK EXPERIENCE

4.1 Please complete in o	chronological order, start i	ng with the most recent:		
Employment/Experience	Employer/Location	Responsibilities	Dates employed Month/ Year	Reason for Leaving
			From	
			- -	
			То	
			-	
			-	
			-	
			-	
			-	
			-	
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			_	

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	spent raising a fami provided in this for are no gaps in the h	ods of time that have not been accounted for in your application, for instance, periods ly or of extended travel, please give details of them here with dates. The information m must provide a complete chronology from the age of 16 – please ensure that there history of your education, employment and other experience. Failure to provide a full your application being rejected.
Da	tes (from – to)	Activity
	-	
	-	
	-	
	-	
4.3	Please confirm wl	nether you have ever been ordained and/or been a member of a religious community.
Yes:		No:
If yes, pl	lease provide details	:-
	·	

5. POST-11 EDUCATION AND TRAINING

5.1 Please complete in chronological order, starting with the most recent:						
Full name and address of establishment	Full time or part time	Dates Attended Month/ Year From - To	Date of Award	Awarding Body & Registration No. (if known)	Award	
Post Graduate Qualifications (please equivalent))	state if you	hold the Cath	olic Certificate	of Religious Studies	(or	
		-				
		-				
		-				
Higher Education Qualifications						
		-				
		-				
		-				
School/college Qualifications						
		-				
		-				
		-				

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Course Title	consider relevant to this po Course Provider	Length of	Dates	Award/Grad
		Course	From / To	received (if applicable)
				.,
6. PROFESSI	ONAL MEMBERSHIPS	3		
list any relevant profes				
list any relevant profes	sional bodies of which you	are a member:		
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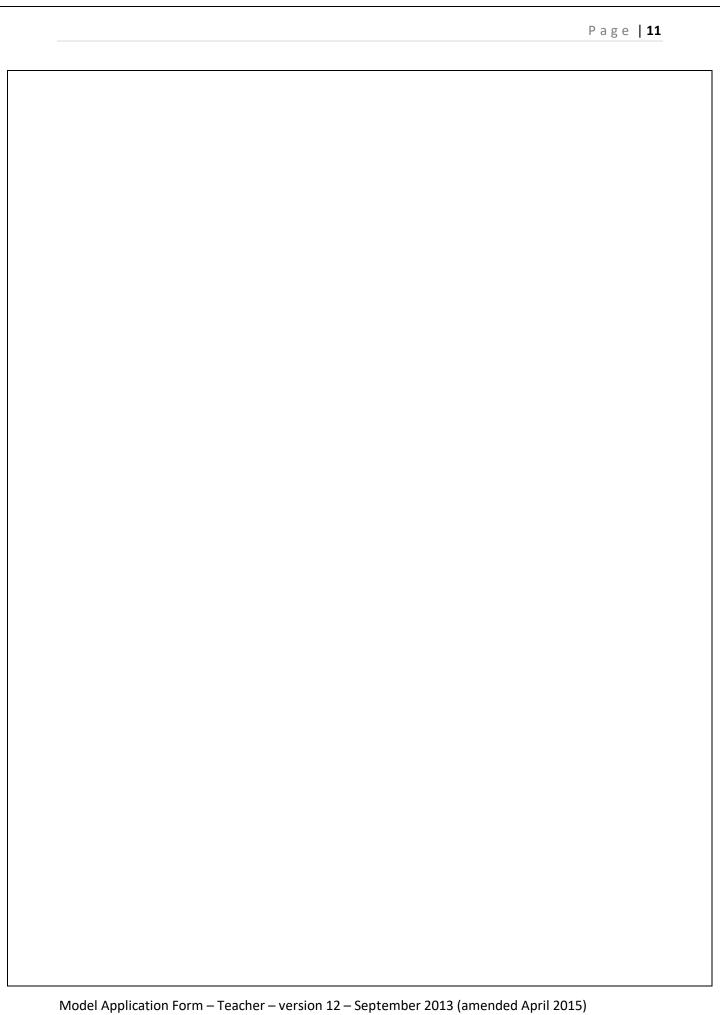
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8. SUPPORTING STATEMENT

Please provide a written statement of no more than 1,300 words detailing why you believe your experience, skills, personal qualities, training and/or education are relevant to your suitability for the post advertised and how you meet the person specification. You should pay particular attention to the national standards for the position for which you are applying.
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9. REFERENCES

Schools/Colleges of a Religious Character are permitted, where recruiting for Teaching posts, to give preference to applicants who are practising Catholics and, therefore, one referee should be your Parish Priest/the Priest of the Parish where you regularly worship. It is the responsibility of the Applicant to ensure that all named referees, including Parish Priests, where applicable, have consented to providing a reference. You are advised to read the relevant section of the Notes to Applicants before completing this section.

Present School/Employer:	
Name:	
Address:	
Designation (if applicable):	
besignation (if applicable).	
Tolonhono	
Telephone:	
Email:	
Other Professional (where you are not currently employed with children, this must be your most	
recent school/college employer):	
Name:	
Address:	
Designation (if applicable):	
Telephone:	
Email:	
Ellidii.	
Parish Priest/Priest of the Parish where you regularly worship (or Additional Professional):	
Name:	
Address:	
Address.	
Designation (if applicable):	
Telephone:	
Email:	
Notes: (i) We reserve the right to take up references with any previous emplo	yer. Please
advise if you do not want us to do so at this stage and provide reasons.	
(ii) If any of your referees knew you by another name, please	

specify that name(s) here:

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9.2 Yes: [er) related by marriage, blood or as a co-habitee to a Company or any current employees of the Govern	•
	ame of Governing Body / Academy Trust	Relationship to you	
	Company member/employee	. ,	
	10. DISCLOSURE OF CRIMINAL DISCLOSURE AND BARRING	AND CHIILD PROTECTION MATTERS AND SERVICE CHECKS	ND
10.1 emplo	The Governing Body / Academy Trust Cor eyees who have substantial access to childre	mpany is obliged by law to operate a checking pren and young people.	ocedure for
persor	nal life, or been the subject of, or involved in, expired.	subject of any child protection concern either in your any disciplinary action in relation thereto, including :	
	please provide details:-		
,,	,		
10.2	•	m that I am not disqualified from working with chillion 142 Education Act 2002 (formerly known as incl	
10.3	upon receipt of satisfactory Disclosure and	offer of employment may be made to you which is Barring Service Checks ("DBS Checks") (formerly CR ld protection matters. Please note that a convictent.	B Check and
	By checking the box below you hereby cons Service ("DBS"):	sent to a DBS Check(s) being made to the Disclosure	and Barring
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11. REHABILITATION OF OFFENDERS ACT 1974

If you have been convicted of a disclosable criminal offence the details must be disclosed on the separate document entitled "Rehabilitation of Offenders Act 1974 – Disclosure Form" together with any cautions or bind-overs, pending criminal convictions, criminal actions and/or court hearings against you. The Rehabilitation of Offenders Act 1974 – Disclosure Form must be enclosed with your application in a sealed envelope marked "confidential". If you do not have any disclosable convictions, please complete the relevant section in the Disclosure Form.

12. DATA PROTECTION ACT 1998

By checking the box below I hereby give my consent for personal information (any information which
may be considered Personal Data and/or Sensitive Data within the meaning of the Data Protection
Act 1998, which includes recruitment monitoring data) provided as part of this application to be held
on computer or other relevant filing systems and to be shared with other accredited organisations or
agencies in accordance with the Data Protection Act 1998.

13. IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006

The Governing Body / Academy Trust Company will require you to provide documentary evidence of your entitlement to undertake the position applied for and/or of your ongoing entitlement to live and work in the United Kingdom in accordance with the Immigration, Asylum and Nationality Act 2006. More information can be found in paragraph 18 of the Notes to Applicants. By checking the box below you hereby confirm that you are legally entitled to work in the United Kingdom and that you will provide documentary evidence of such entitlement when requested:

12. DECLARATION

If you know that any of the information that you have given in this application form is false or if you have knowingly omitted or concealed any relevant fact about your eligibility for employment which comes to our attention then your application may be withdrawn from the recruitment process.

Providing false information is an offence and may result in this application being rejected. If such a discovery is made after you have been appointed then you may be liable to be dismissed summarily. You may also be reported to the Teaching Agency (England only), the GTC (Wales only) or the Police, if appropriate.

By signing below I hereby certify that all the information given by me both on this form and in any supplementary pages and the supporting evidence provided, is correct to the best of my knowledge and belief, that all the questions relating to me have been accurately and fully answered and that I possess all the qualifications that I claim to hold.

I	acknowledge	that	it is	my	respons	ibility	as	the	applica	nt, i	f iı	nvited	for	intervie	w,	to	disclose
i	nformation to	the	panel	whi	ch may	affect	my	' sui	tability	and/	or/	eligib	lity	to work	wi	th	children
а	nd/or vulneral	ole a	dults														

Signature:

Date:

(The post will be subject to the terms and conditions of the appropriate Catholic Education Service model contract, a copy of which will be provided to you before interview if you are shortlisted).

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