

St John's School



APPLICATION FORM

This form is designed to help us assess your application. Please complete this form by writing clearly in BLACK ink. If necessary, please provide further information on a separate sheet.

POSITION APPLIED FOR:

FORENAMES:

SURNAME:

TITLE:

PREVIOUS SURNAME:

ADDRESS:

TELEPHONE:

MOBILE NO:

EMAIL:

DfE REFERENCE NUMBER:

NATIONAL INSURANCE NUMBER:

CURRENT OR MOST RECENT EMPLOYMENT:

NAME AND ADDRESS OF
CURRENT EMPLOYER:

DATE OF APPOINTMENT:

JOB TITLE:

CURRENT SALARY:

NOTICE REQUIRED:

REASON FOR LEAVING
(if applicable)

PREVIOUS EMPLOYMENT:

Most recent first and including any temporary, unpaid and voluntary work experience.

From Month/Year	To Month/Year	NAME and ADDRESS of EMPLOYER	JOB TITLE and BRIEF DESCRIPTION	REASON FOR LEAVING

Please explain any periods not in employment since the end of full-time education.

EDUCATION, QUALIFICATIONS and TRAINING:

Proof of qualifications will be required.

SCHOOL(S) ATTENDED:
11 –18 years

A-LEVELS or equivalent:

Level and subject	Grade	Level and subject	Grade

HIGHER EDUCATION including teacher training (earliest first)

From Month/year	To Month/Year	Universities/Colleges attended – including part time	Title and class of degree and grade e.g. BA(Hons)2 (i)	Subject or Course Title

TRAINING AND DEVELOPMENT:

Please include details and dates of any training and development (i.e. courses, seminars, special projects and other continuous professional activities) relevant to your application.

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Please continue on a separate sheet if necessary

REFERENCES ~ Please give the name, address and telephone number of **TWO** referees.

	1. Present or most recent employer	2. Second Referee
NAME:		
POSITION:		
ADDRESS:		
TELEPHONE:		
EMAIL:		
In what capacity does this person know you?		

GENERAL:	What hobbies, interests do you have?

HEALTH:	If you are successful in this application, prior to formal appointment, you will be required to complete a confidential statement of medical history and may be required to undergo a medical examination.
If you have a disability please let us know of any special arrangements we may need to make if you were short-listed for interview.	

EXISTING CONTACTS WITH THE SCHOOL:	Please indicate if you know any existing employees or governors at the school, and if so how you know them.

SUPPORTING STATEMENT:

Please enclose a letter of application or supporting statement, explaining your interest in this post and why your qualifications, experience and personal qualities are relevant to this appointment. You should mention any recent professional development you have undertaken, and any extra-curricular areas to which you would wish to contribute

NOTES:

1. St John’s School welcomes applications from all, irrespective of gender, marital status, disability, race, age or sexual orientation.
2. It is our practice to contact referees prior to the interview process.
3. Applicants whose qualifications have been obtained outside ENGLAND and WALES should attach a copy of their letter of recognition from the Department for Education.
4. Data Protection Act 1998 – The information or data which you have supplied may be processed and held on computer, and will be processed and held on your personal records if you are appointed. Strict confidentiality will be observed and disclosures will only be made for payroll and personnel administration purposes.

DECLARATION:

I am aware that the post for which I am applying is exempt from the Rehabilitation of Offenders Act 1974 and therefore that all convictions, cautions and bind-overs, including those regarded as ‘spent’ must be declared. I have not been disqualified from working with children, am not named on DfES List 99 or the Protection of Children Act List, am not subject to any sanctions imposed by a regulatory body (e.g. the General Teaching Council), and

either *(please delete as appropriate)*

I have no convictions, cautions or bind-overs

or

I have attached details of any convictions, cautions or bind-overs in a sealed envelope marked confidential.

I hereby certify that the entries on Pages 1 to 4 of this form are complete and correct to the best of my knowledge. I also certify that I have read and understood the contents of the ‘Notice to Applicants’.

.....
Signature

.....
Date

Your application form should be returned by the date specified to:-
The Headmaster
St John’s School, Potter Street Hill, Northwood, Middlesex HA6 3QY.