Application for Teaching Appointment CONFIDENTIAL – PROTECT (IL2)



Na	ame of School: (or write 'General Application') Glade	Primary Sch	nool	Candidate ref		
Pc	ost:				(office use only)		
Αg	ge groups for which trained:		Month/Year C	QTS Awarded			
1.	Specialist Subjects Offered						
	Main:	Other	· ·				
	Teacher Reference Number:						
		5			111/0		
	National Insurance No:	Do yo	ou require permis	ssion to work in tl	ne UK?		
	Please X the box if you are a newly qual (An NQT is required to serve a statutory in Applicants may use a continuation sheet	duction pe	eriod)				
2.	Personal Details						
	Title: Surname:	ć		orename(s):			
Γ	Permanent Address	rormer nar	nes if applicable	n prackets mporary Address	(if applicable)		
	Post Code:		Post Code:				
	Contact Details:		Date of Birth:				
	Telephone: Mobile:						
-	Email:						
3.	Education, Training and Qualification	ns	Datas	Sacandary	Examinations passed		
	Name, location and type of schools		Dates (mm/yyyy)		with grades		
-		From	То				
		From	То				
-	Higher Education						
	University/College/Organisation/Course		Dates (mm/yyyy)	Qualification	ns passed with grades		
-		From	То				
		From	То				
	Initial Teacher Training (NQTs please inclu	ıde ITT cou	rses undertaken)				
	College/Organisation/Course		Dates (mm/yyyy)	Qualifica	tions (to be)/passed		
		From	То				
		From	To				

4. Present Post

Name		School Address					Phase	
Salary £	Special Allowance	Poin	t on Scale	Ages	Taught	Date o		When could you commence duty?
	ent post held includ and areas of respo							
Please give deta	nching Experience ils of all full and part- lude college teaching	ime paid t						
Local Education Authority, Gov. Body or Country	School	practices	Full Time or % Part time	•	ost Held	Ages Taught	Pei Sti	iods of paid teaching service udents give teaching tice dates (mm/yyyy)
							From	То
							From	То
							From	То
							From	То
Please give deta	ustrial, Commer ils of experience (e.g Address of Employ	industria		ial and oth	ner gainful e Natur	employment a	ment a	age of 18 years. nd position held ther full or part time)
yes, please state ote: <i>Canvassing</i>	a councillor, officer, their name and the or failure to disclose a ge could disqualify the	e relations	ship					
he post is exemp	ent: Declaration from the Rehabilita	tion of O	ffenders Act	1974. Yo			this for	m of all offences,
onivioniono, caana	_							
	a criminal offence?							

As the occupant of the post will have substantial access to children, a disclosure request will be made to appropriate organisations to ascertain whether their records reveal any criminal convictions (including spent ones). All Redbridge Schools will comply with Safer Recruitment. NOTE: Failure to disclose any criminal conviction could prevent further consideration of an application for appointment. All information given will be treated in the strictest confidence and will be used for this job application only.

8. Newly Qualified Teachers

National Skills Tests (NQTs prior to 2013 only)

Please complete the boxes and add the date identifying success in the National Skills Tests:

	Pass	Date		Pass	Date		Pass	Date
NUMERACY			LITERACY			ICT		
							(if applicab	le)

	If you have not yet passed the required tests please give the date of your next test: DATE
	Have you already started your Newly Qualified Teacher Induction Period?
	If Yes, date started: DATE
9.	Courses attended in the last 5 years - (Including Denominational Qualifications)
	Please include organising body, title of course, dates and duration (use a continuation sheet if necessary).
	Course Title and Organising Body
10	Special Interests and Relevant Experience
	Please give details of your recreational and cultural interests, voluntary work and any other special skills you have developed which may be relevant to the post and to your work with children.

11.	Letter of Application or Supporting Statement
	Please include more detailed particulars of your experience, skills and further information in support of your application.
	You are advised to limit your Statement to the equivalent of 2 sheets of printed A4.
L	

12. Important Notes or information that you think is relevant, but have not already included

necessary. While this inforr	ils of any disability you may have for which a reasonable adjustment may be mation will not be used for short-listing purposes, it will greatly assist in makin. Please detail any conditions or prohibitions placed upon you by the GTC/D	
13. References		
Safer recruitment guidelin	es recommend that references are taken up prior to interview.	
	addresses of two professional referees. One of these should be your preser Ts are advised to include their initial teacher trainer and a successful teaching	
Referee 1		
Title (Mr/Mrs/Ms/Miss/Dr etc)		
Full Name		
Status		
School/College		
Address		
Postcode		
Email		
Tel No [Fax	
Referee 2		
Title		
(Mr/Mrs/Ms/Miss/Dr etc)		
Full Name		
Status		
School/College		
Address		
Postcode		
Email		

Fax

Tel No

Successful applicants must produce original certificates of qualifications on request.

Declaration

You cannot sign this form on screen. By submitting an e-mail application, you undertake that the information you have provided is true and accurate to the best of your knowledge. You may be required to sign your application at a later stage of the selection process.

I certify that to the best of my knowledge and belief the information given in this application is true and accurate. I understand that if the information is false or misleading it will disqualify me from appointment or after appointment could lead to a disciplinary action or dismissal.

Name Date

If no address appears in the box opposite—please return to:

Mrs Angela Walsh Headteacher Glade Primary School Atherton Road Clayhall IG5 0PF This application form can be returned to **Glade Primary School** by email.

Please use your surname to name and save this document and email to:

admin.glade@redbridge.gov.uk

Alternatively you can post this application to the return address indicated.

Thank you for your application. Your email will be acknowledged. Please provide a stamped addressed envelope if you require a posted acknowledgement



Recruitment Monitoring

Applicant Ref No

In line with the Codes of Practice of the Equality and Human Rights Commission (formerly Equal Opportunities Commission and the Commission for Racial Equality) and as required by the Audit Commission, Redbridge Council collects and maintains information on gender, ethnic origin and disabilities of its employees. As of April 2009 Redbridge Council will also collect and maintain information on sexual orientation, age and religion or belief of its employees. The information you have supplied will be kept confidential within Human Resources. Departments will only see statistical information and it will only be used to provide an overall profile analysis of Redbridge Council.

Please complete this section of the application form, which will be separated from the rest of the form before shortlist selection takes place.

You can be assured that this information will be treated in confidence and will not be available to short listing officers or interviewers or to future potential managers.

- 1. Where did you see this post advertised?
- 2. What is your Date of Birth?
- 3. What is your Ethnic group?

Please choose one selection from A to E and then tick the appropriate box within your chosen section to indicate your cultural background. If you are ticking one of the 'Any other' boxes please state in the space provided

A. White British	☐ Irish ☐ Any Other White Background Please State
B. Mixed	
☐ White and Black Caribbean☐ White and Black Asian	☐ White and Black African☐ Any other Mixed BackgroundPlease State
C. Asian or Asian British	
☐ Indian ☐ Bangladeshi	Pakistani Any other Asian Background Please State
D. Black or Black British	
Caribbean	African Any other Black British Please State
E. Chinese or other Ethnic Group	
Chinese	Any other Background Please State

4. Gender

Female Male 5. Do you have a disability? The Disability Discrimination Act 1995 (DDA) protects people with disabilities. The DDA defines a person as disabled if they have a physical or mental impairment, which has a substantial and long term (i.e. has lasted or is expected to last at least 12 months) and has an adverse effect on the person's ability to carry out normal day-to-day activities.						
5a. Do you consider yourself to have a disability according to the terms given in the DDA?						
Yes No No						
The Council wishes to ensure that people with disabilities are able to access job opportunities as well as people without disabilities do.						
If we know you have a disability we will make adjustments to the working arrangements and/or the working environment provided it is reasonable in the circumstances to do so. We will also make appropriate arrangements for your interview.						
5b. If you have answered yes to having a disability, please let us know how we can support you at the interview stage						
5c. Please tick if any of the following types of disability apply to you. People may experience more than one type of disability, in which case tick all the types that apply. If your disability does not fit any of these types, please mark 'Other' and state your disability						
 Long-standing illness, such as cancer, HIV, diabetes, disease or epilepsy Sensory impairment, such as being blind, having a serious visual impairment or being deaf, having a serious hearing impairment 						
Physical impairment, such as difficulty using your arms or mobility issues, which means using a						
 wheelchair or crutches Learning disability, (such as Down's Syndrome or Dyslexia) or cognitive impairment (such as autism or head-injury) Mental health condition, such as depression 						
Other (please state)						
6. What is your religion or belief?						
☐ Agnostic ☐ Buddhist ☐ Jain ☐ Sikh ☐ Atheist ☐ Christian ☐ Jewish ☐ No Religion ☐ Bahá'í ☐ Hindu ☐ Muslim ☐ Any other religion or belief ☐ Prefer not to say Please state						
7. What is your sexual orientation?						
Bisexual Gay Man Woman/Lesbian Heterosexual Prefer not to say						