Please return your completed application form by email to: swilliams@penistone-gs.uk

or to the HR Officer, Penistone Grammar School, Penistone, Sheffield, S36 7BX

Penistone Grammar School is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.

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| Post |  |
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| Personal Details |
| Last name |  |
| First name(s) |  |
| Title | Mr |  | Mrs |  | Miss |  | Ms |  | Other |  |
| Maiden name or previous names |  |
| Address |  |
| Email address |  |
| National Insurance Number: |  |
| Daytime telephone number |  |
| Mobile number |  |
| Home number |  |

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| Employment |
| Please tell us about your present employment or last job if you are currently unemployed*Please remember to include any specific projects, or areas of responsibility that you have held / or are holding.* |
| Post Title: |  |
| Name and address of Employer |  |
| Date Employment Started: |  | Date Employment Ended:*(if applicable)* |  |
| Notice Required *(if applicable)* |  |
| Reason for Leaving: *(if applicable)* |  |
| Wage/Salary/Grade: |  |
| Please describe in brief your duties and responsibilities (and key achievements where relevant): |
|  |

*Please do not send in a C.V. Starting with the most recent, please list previous employment (paid or unpaid) in chronological order since leaving secondary school. Continue on a separate sheet if necessary. If you use extra pages for your previous employment please:*

*1. Put a cross in the box opposite and follow the same format as this application form*  [ ]

*2. Put your name on the top of the page and number the pages*

|  |  |
| --- | --- |
| Name and address of Employer |  |
| Post Title: |  |
| Date Employment Started: |  | Date Employment Ended:*(if applicable)* |  |
| Reason for Leaving: *(if applicable)* |  |
| Main duties and responsibilities: |
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|  |  |
| --- | --- |
| Name and address of Employer |  |
| Post Title: |  |
| Date Employment Started: |  | Date Employment Ended:*(if applicable)* |  |
| Reason for Leaving: *(if applicable)* |  |
| Main duties and responsibilities: |
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| --- | --- |
| Name and address of Employer |  |
| Post Title: |  |
| Date Employment Started: |  | Date Employment Ended:*(if applicable)* |  |
| Reason for Leaving: *(if applicable)* |  |
| Main duties and responsibilities: |
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| Date Employment Started: |  | Date Employment Ended:*(if applicable)* |  |
| Reason for Leaving: *(if applicable)* |  |
| Main duties and responsibilities: |
|  |

|  |  |
| --- | --- |
| Name and address of Employer |  |
| Post Title: |  |
| Date Employment Started: |  | Date Employment Ended:*(if applicable)* |  |
| Reason for Leaving: *(if applicable)* |  |
| Main duties and responsibilities: |
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| Have you had any breaks in your employment?  | Yes [ ]  | No [ ]  |
| If ‘Yes’ please give details:  |

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| Education and Qualifications |

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| --- |
|  *If you use extra pages for your education and qualifications please:**1. Put a cross in the box opposite and follow the same format as this application form* *2. Remember to put your name on the top of the page and number pages* |[ ]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| School(s) / Colleges / Universities attended | Subjects taken with grades where appropriate | Period of Study Please indicate Full/Part time | Degree or Qualifications obtained | Awarding Body and Date of Award |
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| **In-Service Training***Please give details of any courses relevant to this post attended in the last three years* |
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**Membership of Professional Bodies (if applicable)**

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| --- | --- | --- | --- |
| Professional Body: | Registration Number: | Type of Registration(e.g. Full/Provisional): | Renewal Date: |
|  |  |  |  |

Information supporting your application for this post

By using clear, identifiable examples, please demonstrate how you meet the criteria indicated on the Employee Specification. Please note that only applicants who can demonstrate that they meet all the essential criteria will be shortlisted for interview.

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| *If you use extra pages for supporting your application please:**1. Put a cross in the box opposite and follow the same format as this application form* *2. Remember to put your name on the top of the page and number pages* |[ ]

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| Experience |

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| --- |
| General and Special Knowledge |

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| --- |
| Skills and Abilities |

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| --- |
| Additional Factors |

| References |
| --- |
| *One of the two referees must be your present or last employer, if previously employed. Please note that we do not accept references from relatives or from people writing solely in the capacity of friends.* |
| Referee | Referee |
| Name |  | Name |  |
| Address |  | Address |  |
| Relationship |  | Relationship |  |
| Email Address |  | Email Address |  |
| Telephone No:  |  | Telephone No:  |  |
| Can we contact your referees before your interview? |
| Referee 1: | Yes | [ ]  | No | [ ]  | Referee 2: | Yes | [ ]  | No | [ ]  |

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| If you are already a Barnsley MBC employee, are you ‘at risk’?  |   | Yes [ ]  | No [ ]  |
|  If yes, please provide details of your at risk status |  |
| Do you consider yourself to be disabled?  | Yes [ ]  | No [ ]  |
| Please tell us if there are any dates when you will not be available for interview? |  |

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| **Data Protection Act 1998**The Information you have provided on this application form will be processed by computer. This data will also be used to produce statistics for equal opportunity and recruitment monitoring. |

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| **Canvassing will disqualify**Are you related to any Councillor or employee of the Council? If you are applying for a job in a school, are your related to a Governor, Head Teacher or Teacher at that school?  | Yes |[ ]  No |[ ]
| Name:  |  |
| Relationship:  |  | Position: |  |

Declaration

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| I declare that the information contained in this application is complete and correct. I understand that if I have knowingly provided false information or directly or indirectly canvassed a Councillor, an Officer of the Council, a School Governor, Headteacher or Teacher in support of my application, I may be disqualified from consideration from the post or face disciplinary action after appointment |
| Signed: |  | Date: |  |

Safeguarding Vulnerable Groups

*Failure to disclose information concerning previous convictions may lead to dismissal or disciplinary action by the Authority*

You have applied for a post that is an exempt position under the provisions of the Rehabilitation for Offenders Act 1974. Therefore the statement that “after a certain period of time, convictions need not be disclosed and those convictions be treated as if they never took place” **does not apply.**

You must therefore, declare any pending prosecutions, any convictions, cautions or bind-overs which you have had at any time. The information will be treated as confidential and will only apply to this particular vacancy. **It is essential that you complete and sign this form.**

If you do not have any convictions, cautions, or bind-overs, then please write “None” across the boxes.

If the post you have applied for also has:

* “regular contact with” or
* “cares for”,
* “trains”,
* “supervises” or
* “is in sole charge of children or vulnerable adults”,

then you will be required to apply for a Disclosure of Criminal conviction and/or record to the Criminal Records Bureau should your application be successful and before an appointment is confirmed. Having a criminal record will not necessarily bar you from employment. Each case will be judged on its own merits.

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| Last Name: | First Name: |
|  |  |
|  |  |  |
| Former Names (if any): | Post applied for: |
|  |  |
| *If necessary, please use a separate sheet of paper to give full details. If you use extra pages for details of convictions, cautions or bind-overs put a cross in the box opposite and follow the same format as this application form.*  |[ ]

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| Date: | Details of Convictions, Cautions or Bind-overs: | Penalty: |
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| Are there any matters pending?  | Yes |[ ]   | No |[ ]   |
|  |  |  |  |  |  |  |
| Are you barred from working with children or vulnerable adults? | Yes |[ ]   | No |[ ]   |
|  |  |  |  |  |  |  |
| Are you subject to sanctions from a regulatory body?  | Yes |[ ]   | No |[ ]   |
|  |  |  |  |  |  |  |
| If you answered “yes” to any of above , please give details: |  |  |  |  |  |  |
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**Declaration**

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| I declare that the particulars given are correct and that I have not withheld any facts which might unfavourable affect my application. I am aware that to withhold or falsify information could result in my application being rejected, dismissal or disciplinary action, or possible referral to the police |
| Signed: |  | Date: |  |

*As a minimum, please fill in your name, date of birth and the post applied for; the remainder of this section is optional. The shortlisting/interviewing panel will not see this information. Any data provided on this form will be held securely under the terms of the Data Protection Act.*

**Equal Opportunities Monitoring**

We are committed to Equality of Opportunity in Employment. By collecting this information, we are able to ensure that our policies and systems are objective and fair. Please help us by completing this form.

|  |
| --- |
| Post Title: |
|   |
| Name: | Date of Birth: |
|  |  |
| Are you currently employed by Barnsley MBC? Yes [ ]  No [ ]   |
| For ethnicity, choose ONE section from A to E, then tick the appropriate box to indicate your cultural background. If you tick (√) an “Other” box, please specify as shown. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Ethnicity** |   | Prefer not to say |[ ]   |  |
| **A** White |  | **B** Mixed |  |  | **C** Asian or Asian British  |
| British |[ ]   | White and Black Caribbean |[ ]   | Indian  |[ ]   |
|  |  |  |  |  |  |  |  |  |
| English |[ ]   | White and Black African |[ ]   | Pakistani |[ ]   |
|  |  |  |  |  |  |  |  |  |
| Scottish |[ ]   | White and Asian |[ ]   | Bangladeshi |[ ]   |
|  |  |  |  |  |  |  |  |  |
| Welsh |[ ]   | Other Mixed\* |[ ]   | Other Asian\* |[ ]   |
|  |  |  |  |  |  |  |  |  |
| Irish |[ ]   |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Other White\* |[ ]   |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| **D** Black or Black British |  |  | **E** Chinese, Chinese British or Other Ethnic Group |  |  |
|  |  |  |  |  |  |  |  |  |
| Caribbean |[ ]   | Chinese |[ ]   |  |  |  |
|  |  |  |  |  |  |  |  |  |
| African |[ ]   | Any Other Background\* |[ ]   |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Other Black\* |[ ]   |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| \*If ‘Other’; please specify |  |
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| **Religion** |  |  | Prefer not to say |[ ]   |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Christian (including all Christian denominations)  |[ ]  Buddhist |[ ]   | Hindu |[ ]   |
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| Muslim |[ ]  Sikh |[ ]  Jewish |[ ]  None |[ ]   | Other\* |[ ]   |
|  |  |  |  |  |  |  |  |  |
| \*If ‘Other’ please specify |  |
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| **Gender** |  |  | Prefer not to say |[ ]   |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Male  |[ ]   | Female |[ ]   |  |  |  |
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| **Disabled** |  |  | Prefer not to say |[ ]   |  |  |  |
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Do you consider yourself to be disabled Yes [ ]  No [ ]

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| **Age Group** |  |  |  |  |  |  |  |  |
| 16-17 |[ ]  18-19 |[ ]  20-24 |[ ]  25-29 |[ ]  30-34 |[ ]  35-39 |[ ]   |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| 40-44 |[ ]  45-49 |[ ]  50-54 |[ ]  55-59 |[ ]  60-64 |[ ]  65+ |[ ]   |