

**Job Application Form**

**Name:**

**Which Job Are You Applying For?**

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| **Position applied for:** |

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| **Data Protection Notice**Throughout this form we ask for some personal data about you. We’ll only use this data in line with data protection legislation and process your data for one or more of the following reasons permitted in law:* You have given us your consent
* We must process it to comply with our legal obligations

You’ll find more information on how we process your data in our Privacy Notice for Applicants at www.trinityspecialistcollege.co.uk |

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| **Disclosure and Barring and Recruitment Checks**The college is legally obligated to process an enhanced Disclosure and Barring Service (DBS) check before making appointments to relevant posts.The DBS check will reveal both spend and unspent convictions, cautions, reprimands and final warnings, and any other information held by local police that’s considered relevant to the role. Any information that is “protected” under the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 will not appear on a DBS Certificate.For posts in regulated activity, the DBS check will include a barred list check.**It is an offence to seek employment in regulated activity if you are on a barred list.**If you have lived or worked outside of the UK for 3 months or more in the last 5 years, the College will require additional information in order to comply with “safer recruitment” requirements. If you answer “Yes” to the question below, we may contact you for additional information in due course.**Have you lived or worked outside of the UK for 3 months or more in the last 5 years?** Yes No Any job offer will be conditional on the satisfactory completion of the pre-employment checks.We will not ask for any criminal records information until we’ve received the results of a DBS check.Any convictions listed on a DBS check will be considered on a case-by-case basis. |

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| **Right to Work in the UK**The college will require you to provide evidence of your right to work in the UK in accordance with the Immigration, Asylum and Nationality Act 2006.By signing this application, you agree to provide such evidence when requested. |

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| **Sign and Date**Name (please print) Signature:Date:  |

1. **Instructions**

Please complete all sections in this form using black ink or type.

The sections of this application form that include your personal details and equalities monitoring information will be detached prior to shortlisting. This is to ensure that your application is dealt with objectively

Applications will only be accepted if they are completed in full.

Please return your completed application form to: recruitment@trinityspecialistcollege.co.uk or if by post: The Lindridge, Lindridge Road, Sutton Coldfield, West Midlands, B75 7JB

1. **Personal Details**

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| **Personal Details** |
| First Name |  |
| Middle Name(s) |  |
| Surname |  |
| Preferred title |  |
| Previous Surnames |  |
| If you prefer to be called by a name other than the one listed above, please specify |  |
| Date of birth |  |
| **Contact Details** |
| Address |  |
| Postcode |  |
| Home phone |  |
| Mobile phone |  |
| Email Address |  |
| National Insurance Number |  |
| **Disability and Accessibility** |
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| **Relationship to Trinity Specialist College** |
| Please list any personal relationships that exist between you and any of the following members of the College community:-* Trustees
* Directors
* Staff
* Students/Learners/Service Users

If you have a relationship with any of the above, this does not necessarily prevent them from acting as a referee for you.Name, relationship and role at College:N/A |

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| 1. **Employment History**

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| **Current Employment Details** |
| Job title |  |
| Employer details (name, address, email and/or telephone number) |  |
| Dates Employed |  |
| Permanent or Temporary |  |
| Part-time or full-time |  |
| Salary (including benefits) |  |
| Description of responsibilities |  |
| **Previous Employment (including voluntary work if any)** |  |
| **Please give the latest first. Please explain any gaps in employment history** |  |
| Dates employed | Name and address of employer | Job title | Description of responsibilities | Reason for Leaving | Salary |
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| 1. **Education and Training**

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| **Education and Qualifications** |
| **Please provide details of your education from secondary school onwards. You will be required to produce evidence of qualifications** |
| Dates attended (month and year) | Name and location of school/college/university | Qualifications gained (including grades) |  |
|  |  |  |  |
| **Training and Professional Development** |
| **Please give details of training or professional development courses undertaken in the last 3 years that are relevant to your application** |
| Course dates and length of course | Course title | Qualification obtained | Course Provider |
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| **Teacher Status** |
| Teacher Reference Number |  |
| Do you have QTS? Please give your QTS Certificate Number (where applicable) |  |
| Date of qualification |  |
| Are you subject to a teacher prohibition order or interim prohibition order, issued by the secretary of state, as a result of misconduct? |  |
| Are you subject to a General Teaching Council sanction or restriction? |  |

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| **Information in Support of your Application** |
| **Please explain how your experience, training and personal qualities match the requirements of the role as set out in the job description and person specification. You may wish to discuss additional skills and special interests.** |
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| When would you be available to start work for us? |

1. **References**

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| Please give the names and contact details of two people who are able to comment on your suitability for this post. One must be your current or last employer. If you haven’t previously been employed, please provide details of another suitable referee.Friends or relatives would not be considered appropriate as a referee. The College reserves the right to seek any additional references we deem appropriate.**Please note that no approach will be made to your present employer without your permission; however we will request a reference from your previous employer prior to interview.**Please let your referees know that you’ve listed them as a referee. |
| **Reference 1** |
| Name |  |
| Position/Job Title |  |
| Relationship to you |  |
| Address and postcode |  |
| Contact number |  |
| Email address |  |
| Is this your current employer? |  |
| May we approach this employer for a reference prior to interview? |  |
| **Reference 2** |
| Name |  |
| Position/Job Title |  |
| Relationship to you |  |
| Address and postcode |  |
| Contact number |  |
| Email address |  |
| Is this your current employer? |  |
| May we approach this employer for a reference prior to interview? |  |

If either of your referees knows you by a different name, please state:

**Trinity Specialist College**

**EQUAL OPPORTUNITIES MONITORING FORM**

## We are committed to ensuring that all job and volunteer applicants, workers, associates and students are treated equally and not discriminated against To assess whether our policies are effective and whether we’re complying with relevant legislation, we need to know the information below. You are not obliged to answer all the questions but the more information you supply, the more effective our monitoring will be. All information supplied will be treated in the strictest confidence. Thank you for your assistance.

## This information will not be used during the selection process. It will be used for monitoring purposes only.

|  |  |
| --- | --- |
|  |  |
| What is your sex? Male c:\e3_work\images\tick_box.tif Female c:\e3_work\images\tick_box.tif |  |

## How would you describe your nationality and/or ethnicity (please tick)?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **A****White:** |  | **B****Mixed race:** |  | **C****Asian or Asian British:** |  |
| British - English, Scottish or Welsh | c:\e3_work\images\tick_box.tif | White and Black Caribbean | c:\e3_work\images\tick_box.tif | Indian | c:\e3_work\images\tick_box.tif |
| Irish | c:\e3_work\images\tick_box.tif | White and Black African | c:\e3_work\images\tick_box.tif | Pakistani | c:\e3_work\images\tick_box.tif |
| Any other White background  | c:\e3_work\images\tick_box.tif | White and Asian | c:\e3_work\images\tick_box.tif | Bangladeshi | c:\e3_work\images\tick_box.tif |
|  |  | Any other Mixed background | c:\e3_work\images\tick_box.tif | Any other Asian background | c:\e3_work\images\tick_box.tif |
| **D****Black or Black British:** |  | **E****Chinese or other ethnic group:** |  |  |  |
| Caribbean | c:\e3_work\images\tick_box.tif | Chinese | c:\e3_work\images\tick_box.tif |  |  |
| African | c:\e3_work\images\tick_box.tif | Other ethnic group | c:\e3_work\images\tick_box.tif |  |  |
| Any other Black background | c:\e3_work\images\tick_box.tif |  |  |  |  |

## Is your age between (please tick):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 16-24 | c:\e3_work\images\tick_box.tif | 25-29 | c:\e3_work\images\tick_box.tif | 30-39 | c:\e3_work\images\tick_box.tif |
| 40-49 | c:\e3_work\images\tick_box.tif | 50-59 | c:\e3_work\images\tick_box.tif | 60 or over | c:\e3_work\images\tick_box.tif |

Do you identify as the gender you were assigned at birth? Yes  No Prefer not to say 

## How would you describe your sexual orientation (please tick)?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Heterosexual | c:\e3_work\images\tick_box.tif | Bisexual | c:\e3_work\images\tick_box.tif | Lesbian | c:\e3_work\images\tick_box.tif |
| Gay | c:\e3_work\images\tick_box.tif | Prefer not to say | c:\e3_work\images\tick_box.tif |  |  |

## How would you describe your religion?

|  |  |
| --- | --- |
| My religion is: | Christian |
| Prefer not to say | c:\e3_work\images\tick_box.tif |
| I am not religious | c:\e3_work\images\tick_box.tif |

## Are your day to day activities significantly limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

|  |  |  |  |
| --- | --- | --- | --- |
| Yes | c:\e3_work\images\tick_box.tif | No | c:\e3_work\images\tick_box.tif |
| Prefer not to say | c:\e3_work\images\tick_box.tif |  |  |

If you answered ‘yes’ to the question above, please state the type of impairment. Please tick all that apply. If none of the below categories applies, please mark ‘other’

 Physical impairment

 Sensory impairment

 Learning difficulty/disability

 Long-standing illness

 Mental health condition

 Developmental condition

 Other

## Where did you hear about this job/volunteer opportunity (please tick)?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Newspaper (please specify which one) | c:\e3_work\images\tick_box.tif | Friend | c:\e3_work\images\tick_box.tif | Other (please specify) | Internal Vacancy  |
|  |  |  |  |  |