



Job Application Form

Your Name:

Position applied for:

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

Disclosure and Barring and Recruitment Checks

The amendments to the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (2013 and 2020) provides that when applying for certain jobs and activities, certain convictions and cautions are considered 'protected'. This means that they do not need to be disclosed to employers, and if they are disclosed, employers cannot take them into account.

Do you have any convictions or cautions (excluding youth cautions, reprimands or warnings) that are not 'protected' as defined by the [Ministry of Justice](#)?

If you do have any convictions or; before signing this section of the application form, you must check the [filtering rules](#) to determine if you should declare them or if they are now 'protected' and no longer require disclosure.

Failure to disclose any previous convictions or cautions that are not protected could result in dismissal should it be subsequently discovered.

Having a criminal conviction will not necessarily bar you from employment. Any information given, either when returning this application form or at interview will be entirely confidential and will be considered only in relation to this application.

Please tick one of the following statements:

I confirm that I have NO criminal convictions or cautions which would not be filtered in line with current guidance. I am not barred or disqualified from working with adults, or subject to a prohibition order.

I confirm that I DO have criminal convictions or cautions which would not be filtered in line with current guidance or are barred or disqualified from working with children, or subject to a prohibition order. I enclose full details in a sealed envelope marked 'Private and Confidential'.

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.

CONSENT, DISCLOSURE AND CONFIRMATION

Consent

The information collected on this form and other information which constitutes your personnel record will be used in compliance with the Data Protection Act 2018. The information is being collected for the purpose of administering the employment and training of employees.

The information may be disclosed, as appropriate, within the College, to trustees, to Occupational Health and to other relevant public and statutory bodies. You should also note that because we have a duty to protect the public funds we handle, we might need to use the information you have provided on this form to prevent and detect fraud. We may also share this information for the same purposes with other organisations, which handle public funds.

I consent to my employer recording and processing the information detailed in this application form. I understand that this information may be used by my employer in pursuance of its business purposes and my consent is conditional upon my employer complying with their obligations under the Data Protection Act 2018.

Application forms of unsuccessful candidates will be destroyed after six months following an appointment to the job

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.

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

2. Personal Details

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	
Contact Details	
Address	
Postcode	
Home phone	

Mobile phone	
Email Address	
National Insurance Number	
Date Of Birth	
Disability and Accessibility	
Relationship to Trinity Specialist College	
<p>Please list any personal relationships that exist between you and any of the following members of the College community: -</p> <ul style="list-style-type: none"> ● Trustees ● Directors ● Staff ● Students/Learners/Service Users <p>If you have a relationship with any of the above, this does not necessarily prevent them from acting as a referee for you.</p> <p>Name, relationship and role at College:</p>	

3. Employment History

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

4. Education and Training

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

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?	

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.

	When would you be available to start work for us?

5. References

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?	

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

Female

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

A

White:

British -
English,
Scottish or
Welsh

Irish

Any other
White

B

Mixed race:

White and
Black
Caribbean

White and
Black African

White and
Asian

C

**Asian or
Asian British:**

Indian

Pakistani

Bangladeshi

background

Any other
Mixed
background

Any other
Asian
background

D

**Black or
Black British:**

Caribbean

African

Any other
Black
background

E

**Chinese or
another
ethnic group:**

Chinese

Other ethnic
group

○ Is your age between (please tick):

16-24	<input type="checkbox"/>	25-29	<input type="checkbox"/>	30-39	<input type="checkbox"/>
40-49	<input type="checkbox"/>	50-59	<input type="checkbox"/>	60 or over	<input type="checkbox"/>

○

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

Heterosexual	<input type="checkbox"/>	Bisexual	<input type="checkbox"/>	Lesbian	<input type="checkbox"/>
Gay	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>		

○

○ How would you describe your religion?

My religion is:

Christian

Prefer not to say

I am not religious

○ 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	<input type="checkbox"/>	No	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>		

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'

Learning difficulty/disability

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

Newspaper
(please specify
which one)

Friend

Other
(please
specify)

Internal
Vacancy