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**GENERAL DETAILS FOR APPLICANTS**

**Teacher SEND - MPS**

**The appointment of teaching staff**

We welcome applications from enthusiastic, lively and able practitioners, who would like to join a very dedicated and hardworking staff. The Trust is committed to providing high quality education and the continuing professional development of staff. All new appointees are encouraged to play a full part in the life of the school.

**Visits to the school**

Prospective candidates are invited to visit the schools. Please contact 020 8460 1121 to arrange a visit.

**Guidance regarding application**

The letter of application should not repeat information given on the application form. Please indicate your curriculum strengths and areas of special interest and experience**.**

**Visit our Websites**

Information about our schools can be found on our website at [www.mosaicschoolslearningtrust.org](http://www.mosaicschoolslearningtrust.org).uk

**Applications/Interviews**

Completed applications should be emailed to recruitment@mslt.org.uk or posted to Wickham Common Primary School Gates Green Road West Wickham BR4 9DG for the attention of Mrs J Singer, HR Officer Please note: **Curriculum Vitae are NOT accepted** as an alternative to a completed application form.

We would also advise that application forms of unsuccessful applicants are retained for six months and those successful candidates’ forms are retained throughout the period of employment and for a reasonable time thereafter.

Applicants who have not been contacted within 2 weeks of the closing date can assume they have not been successful on this particular occasion.

Successful applicants will be advised of interview date.

Thank you for responding to our advertisement.



TRN:

If yes, please give date of recognition (month, year):

YES 

**Application Form**

**For Teaching Appointments**

Academy:

Post:

 **Personal Details** (BLOCK CAPITALS)

Surname: Title (eg. Mr, Mrs, Miss, Ms):

First name/s:

Previous surname if relevant:

Address:

Town or City: Post Code:

Telephone No. (home): Email (home):

Telephone No. (work): Email (work):

Telephone No. (mobile):

 NO 

Do you require a work permit to work in the UK?

If yes and applicable, when does your permit expire? (month, year):

YES 

NO 

Are you recognised by the DfES as a qualified teacher in the UK?

Have you successfully completed a period of probation/statutory induction

YES 

N O 

as a qualified teacher in this country as required by the DfES?

If yes, please give date of completion (month, year):

Teaching experience (years):

**Teacher Training** *– please give details*

Name of Teacher Training Institution:

From (month, year): To (month, year):

Age range you are trained to teach:

Qualification obtained:

Subject you are trained to teach:

Additional subjects which you are able to teach:

Any additional languages spoken:

**Please turn over**

**Page 1**

National Insurance No.

TEACHER SEND 0.6 – Valley Primary School

Title and subjects

 **Other Education, Qualifications and Training (excluding initial teacher training)**

**Current or Most Recent Post (including initial teacher training placement)**

(a) Full name and address of school/college, or employer:

(b) Type of School: (c) Number of Pupils:

(d) Local Education Authority:

(e) Position held: (f) Scale/grade/MPS:

(g) Appointment held – Full-time/Part-time:

(h) Dates from/to:

(I) Present salary (give details of special allowances):

**Page 2**

**Please continue**

Certificate/Qualification Grade/Class *(Please specify)*

School, College or University

*(give address)*

Reason for leaving

*(if applicable)*

**Previous Teaching/Employment Experience**

**(Please start with most recent and continue on a separate sheet if necessary)**

on leaving

**Page 3**

**Please continue**

Name of Employer

Type of School/ Nature of Business

From

To

Post held

Salary/Scale

**Your Supporting Statement**

As part of your application you are requested to set out on a separate sheet(s) relevant information in support of your application. Please clearly mark your separate sheet(s) to avoid confusion. Use this section to set out your reasons for applying for this post and show how your qualifications, experience, skills and qualities support your application.

**Page 4**

**Please continue**

Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Gaps in Employment**

Please list any gaps in employment together with the reasons for the gaps:

Post Code

Tel No

Period known (years)

Email

Post Code

Period known (years)

Email

Tel No

(ii) Will you require any assistance if called for interview? If yes, please give details:

If yes: (i) If you are aware of any equipment or adaptations that will assist you, please give details:

 YES  NO 

If part-time, have you made a positive election to join the Teachers’ Pension Scheme:

NO  

**Additional Information**

**Superannuation**

Do you contribute to the Teachers’ Pension Scheme: YES 

Do you consider yourself to have a disability? YES  NO 

**Disability**

**References**

References will be obtained from employers during the last 3 years. If you have not been in employment during this time please give the names of two personal referees (not family members) from whom confidential references may be obtained. We may also contact previous employers where you have worked with children. Your referees will be contacted if you are called for interview – please let us know if this is not suitable.

Referee

Referee

Relationship to You \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to You \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Superannuation Scheme (give name):

**Please continue**

**Page 5**

Disclosure of any criminal background is required. Because of the nature of the work, teaching in the UK is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974 (Exceptions) (Amendment) order 1986,

and therefore applicants are not entitled to withhold information about convictions which for other purposes are spent under the provisions of the Act. Offers of employment will also be dependent on completion of a satisfactory police check. Disclosure of a criminal background will not necessarily bar you from any appointment.

**Protection of Children**

**Please continue**

**Page 6**

For any position that you apply for, if unsuccessful, this information may be retained on file for 6 months. The information may be used in internal proceedings to consider a complaint about the selection process and/or to defend against a legal challenge to the fairness of the selection process from any interested party. The information you provide to us on this form may also be used in the prevention and detection of crime and fraud, or shared with other bodies administering public funds solely for this purpose.

**Data Protection**

Under the terms of the General Data Protection Regulation 2018, the information you provide on this form will only be used by the Academy for the purpose of assessing your suitability for employment, for monitoring policies and procedures, and for personal management purposes.

I understand that my background checks will include an online check including social media and other sites in line with KCSIE guidelines set out by the Department for Education. I declare that the information I have provided in my application and additional documents is true and complete to the best of my knowledge and I agree may be used for the purposes of carrying out such a check.

**To be signed, by hand, by all Applicants**

I confirm that, to the best of my knowledge, the information on this form is true and correct.

I am in possession of the certificates which I claim to hold and understand that wilful falsification may result in dismissal if I am appointed.

I understand that any offer of employment will be subject to satisfactory medical and police checks.

Signed: Date:

If yes, please give details:

Have you ever been convicted of a criminal offence or received a Police Caution? (You do not need to included youth cautions, reprimands or warnings) Yes / No

Please give details of your police check with the Disclosure and Barring Service:

Issue Date:

DBS Number:

Sentence:

Date: Offence:

**Whilst completing the recruitment monitoring form below is optional, it is mandatory to fill in the date of birth and gender sections to enable online searches and identification.**

**This form is removed before the shortlisting process is conducted.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** **of Birth** |  |  |  |

**Remove Before Sifting Process**

**Recruitment Monitoring**

**Gender**

|  |  |  |  |
| --- | --- | --- | --- |
| [ ]  | Male | [ ]  | Female |

The Academy is committed to Equal Opportunities. The aim of its policy is to ensure that no job applicant or employee is treated unfairly on the grounds of age, colour, national origins, nationality, race, disability, family commitments, gender, marital status, membership or otherwise of a trade union, religion, or sexual orientation.

Without accurate data on the composition of our workforce and on job applicants we are unable to monitor the effectiveness of our policies and procedures. Therefore, we ask for your cooperation in completing the monitoring section of this form. This information will be used for statistical purposes only and will not be reproduced in a way that enables individuals to be identified. All information supplied by job applicants is treated in the strictest confidence.

**Personal Details**

|  |  |
| --- | --- |
| Surname |  |
|  | **(*BLOCK CAPITALS)*** |

|  |  |
| --- | --- |
| First Name/s |  |

**Advertising Response** *– Please indicate how you became aware of the post by ticking the appropriate box.*

**11**

|  |  |
| --- | --- |
| [ ]  Newspaper *(please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)* | [ ]  Professional journal *(please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)* |
| [ ]  Bromley website | [ ]  Internal vacancy list | [ ]  Friend/relative | [ ]  Employment Services |
| [ ]  Other *(please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)* |  |

**Ethnic Group** *– Please tick one box (or write in one box if appropriate)*

|  |  |  |  |
| --- | --- | --- | --- |
| **(a)** | **Asian or Asian British** | **(b)** | **Black or Black British** |
|  | [ ]  Bangladeshi |  | [ ]  African |
|  | [ ]  Indian |  | [ ]  Caribbean |
|  | [ ]  Pakistani |  |  |
|  | Asian other *(please write in)* |  | Black other *(please write in)* |
| **(c)** | **Mixed** | **(d)** | **White** |
|  | [ ]  White and Asian |  | [ ]  British |
|  | [ ]  White and Black African |  | [ ]  European |
|  | [ ]  White and Black Caribbean |  | [ ]  Irish |
|  |  |  | [ ]  Romany/Traveller |
|  | Mixed other *(please write in)* |  | White other *(please write in)* |
| **(e)** | **Chinese or other ethnic group** | **(f)** | **I decline to self classify** |
|  | [ ]  Chinese |  | [ ]  *(please tick)* |
|  | Other *(please write in)**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* |  |  |

**Disability**

To help you decide whether you have disability as defined under the Disability Discrimination Act 1995 please read the following information:

A disability is defined as ‘a physical or mental impairment, which has a substantial and long-term adverse effect on a person’s ability to carry out normal day‑to‑day activities’.

The effect an impairment may have on day-to-day activities is defined in the Act as falling within the following categories:

(1) mobility;

(2) manual dexterity;

(3) physical co‑ordination;

(4) continence;

(5) ability to lift, carry or otherwise move everyday objects;

(6) speech, hearing or eyesight;

(7) memory or ability to concentrate, learn or understand; or

(8) perception of the risk of physical danger.

The impairment has to be substantial, that is something more than trivial and it needs to be long-term, i.e. has lasted or is likely to last in total for at least twelve months or is likely to last for the rest of the life of the person affected. Having considered the above information, please tick the appropriate box and indicate the category of impairment, which applies to your disability.

**Please tick one of the following as defined by the Disability Discrimination Act 1995**

**[ ]  I do** consider myself to have a disability

**[ ]  I do not** consider myself to have a disability

**[ ]  I decline to** self classify as to whether I consider I have a disability

**Age –What is your age range?**

**[ ]**  Under 20

**[ ]** 20 - 29

**[ ]** 30 - 39

**[ ]** 40 - 49

**[ ]** 50 - 59

**[ ]** 60+