**The Bishop of Winchester Academy**

**Application Form**

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| **For the post of:** |  |
| **Name:** |  |

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| **Data Protection Notice** |
| Throughout this form we ask for some personal data about you. We will 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 will find more information on how we use your personal data in our privacy notice for job applicants.  |

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| **Vacancy Information** |
| Application for the post of: |  |
| What date are you available to begin in a new post? |  |
| Where did you hear about this vacancy? |  |

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| **Disclosure and Barring and Recruitment Checks** |
| The academy 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 spent 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.Any data processed as part of the DBS check will be processed in accordance with data protection regulations and the academy’s privacy notice.  |
| Do you have a DBS certificate: | 🞏 Yes🞏 No | Date of check: |  |
| The Update Service is an online subscription that allows you to keep your standard or enhanced certificates up-to-date, and allows employers to check a certificate online. |
| Are you currently registered with the Update Service: | 🞏 Yes🞏 No | Level of check: | 🞏 Standard🞏 Enhanced |
| Certificate number: |  |

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| If you have lived or worked outside the UK in the last 5 years, the academy may 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 in the last 5 years? | 🞏 Yes🞏 No |
| If yes, please provide details. Please specify which countries and the month and year those stays started and ended. |  |

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| Have you ever been subject to any disciplinary action in your current or previous positions, or had any allegations made against you? | 🞏 Yes🞏 No |
| If yes, please provide details: |  |
| Have you ever been subject to a capability process in your current or previous positions? | 🞏 Yes🞏 No |
| If yes, please provide details: |  |
| Any employment offer will be conditional on the satisfactory completion of the necessary pre-employment checks.We will not ask for any criminal records information until we have 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 academy 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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| **Declaration** |
| 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 my appointment or after appointment could lead to disciplinary action or dismissal. I acknowledge that where this is submitted electronically and without a signature, electronic receipt of this form by the employer will be deemed equivalent to a submission of a signed version and will constitute confirmation of the declaration.  |
| Name: |  |
| Signed: |  | Date: |  |

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| **Application** |
| Please complete all sections of this form using black ink or typeThe section that includes the equality monitoring information will be detached prior to shortlisting, to ensure that your application is dealt with objectively. Applications will only be accepted if they are completed in full. This form, supporting statement and covering letter (which should be addressed to Mr Paul McKeown, Principal) should be submitted either by:Email to: Recruitment@tbowa.orgPost to: Human Resources, The Bishop of Winchester Academy, Mallard Road, Bournemouth, BH8 9PW  |

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| **Personal Details** |
| Surname: |  | Preferred Title: |  |
| Forenames: |  |
| Previous names:(if applicable) |  | National Insurance number: |  |
| **Contact Details** |
| Address: |  |
| Email address: |  |
| Home telephone number: |  | Mobile telephone number: |  |
| **Disability and Accessibility** |
| The academy has committed to ensuring that applicants with disabilities and impairments receive equal opportunities and treatment.If you have a disability or impairment, and would like us to make adjustments or arrangements to assist if you are called for an interview, please state the arrangements you require: |
| **Relationship to the academy** |
| Please list any personal relationships that exist between you and any of the following member of the academy community:* Governor / trustee
* Staff
* Students

If you have a relationship with a governor, trustee or employee, this does not necessarily prevent them from acting as a referee for you.  |
| Name: | Relationship: | Role at the academy: |
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| **Supporting statement** |
| Your application should be supported by a letter of not more than 2 sides of A4 (12pt), explaining why you are right for this post. Include any experience, skills or other information which you think makes you suited to this particular role. Your application may not be considered if you do not tailor it to this role.  |

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| **Teaching Information** |
| DfE number: |  | Do you hold QTS: | 🞏 Yes🞏 No |
| Subject(s) taught:Please list all subjects that you have ever taught |  |
| Other :Please list other subjects you would be confident in teaching |  |

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| **Education and Training** |
| Please provide details of your education from secondary school onwards.You will be required to produce evidence of qualifications. |
| Name and address of institution: | Dates attended: (month and year) | Qualifications gained: (include subject, level and grade) |
| Secondary education: |  |  |
| Higher education: |  |  |
| Further education: |  |  |
| PGCE: |  |  |
| Post Graduate: |  |  |
| NPQH: |  |  |

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| **Training and Professional Development** |
| Please give details of training or professional development courses undertaken that are relevant to your application. |
| Course title | Qualification obtained | Course provider | Course dates | Course duration |
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| **Additional skills** |
| If you have any additional skills, hobbies, or abilities that you think would be useful to share, but would not mention in a personal statement, please details them here. |
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| Do you hold a full driving licence: | 🞏 Yes🞏 No |
| Do you have any minibus driving training: | 🞏 Yes🞏 No | If yes, please provide details: |  |
| Do you have a first aid training certificate: | 🞏 Yes🞏 No | If yes, please provide details: |  |

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| **Employment History** |
| Please list your teaching or school employment history beginning with your current or most recent employment.  |
| Job Title | Employer details (name, address, email &/or telephone) | Dates employed | Age range taught | No on roll |  Permanent / Fixed Term / Temporary / Supply | Full time or part time | Salary (incl allowances)(evidence may be requested) | Description of responsibilities | Reason for leaving |
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| **Employment other than teaching or in a school** |
| Please provide details of all previous employment. List the most recent employment first. |
| Job title | Name and address of employer | Dates employed | Description of duties/ responsibilities | Reason for leaving |
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| The academy may not consider your application if you do not explain any gaps in your employment / education history. |
| Do you have any gaps in your employment/education history: | 🞏 Yes🞏 No |
| If yes, please explain the reasons for the gap and include the dates: |  |

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| The academy may request evidence of your current salary. The post you have applied for may not be in line with your current salary. |
| Current Basic Salary | £ | Scale & point (if relevant): |  |
| Allowance | £ | Responsibility: |  |
| Total | £ |

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| **References** |
| Please provide the names of 2 people who are able to comment on your professional work, one of whom should be your current or most recent employer. If you are a teacher or have been employed in a school the referee must be the head teacher. If you’ve not been previously employed, please provide details of another suitable referee. The academy reserves the right to seek any additional references we deem appropriate. Please let your referees know that you have listed them as a referee, and to expect a request for a reference should you be shortlisted.  |
| Referee 1: | Referee 2: |
| Name: |  | Name: |  |
| Position: |  | Position: |  |
| Relationship to you: |  | Relationship to you: |  |
| Organisation: |  | Organisation: |  |
| Address (incl postcode): |  | Address (incl postcode): |  |
| Contact Number: |  | Contact Number: |  |
| Email address: |  | Email address: |  |
| Is this your current / most recent employer | 🞏 Yes🞏 No | Is this your current / most recent employer | 🞏 Yes🞏 No |
| If either of your referees knows you by a different name, please state: |  |
| If you do not wish us to contact your referees without your prior agreement please tick box: 🞏 |
| If you have worked with any employers you have listed above for less than 24 months, please add an additional referee: |

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| Name: |  | Address (incl postcode): |  |
| Position: |  |
| Relationship to you: |  | Contact Number: |  |
| Organisation: |  | Email address: |  |

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| **Employment in a Church of England Academy** |
| We welcome people of many faiths and beliefs. We do, however, ask that all staff should support the values, ethos and philosophy of a Christian school, in the tradition of the Church of England, and we would expect all staff to make a positive contribution to the development of that Christian ethos.  |
| If you are a practising member of a Christian church, please give details: |
| Place of Worship: |  | Denomination: |  |
| Address: |  | Diocese: (if applicable) |  |
| Name of parish priest or minister, and contact details, from whom a reference may be sought: |  |

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| **Equal Opportunities Monitoring** |
| We are bound by the Public Sector Equality Duty to promote equality for everyone. To assess whether we are meeting this duty, whether our policies are effective and whether we are complying with relevant legislation, we need to know the information requested below.This information will not be used during the selection process. It will be used for monitoring purposes only.  |
| Date of birth: |  | Sex: | 🞏 Male🞏 Female |
| Gender: | 🞏 Male🞏 Female🞏 Other🞏 Prefer not to say | Do you identify as the gender you were assigned at birth: | 🞏 Yes🞏 No🞏 Prefer not to say |
| Sexual orientation: | 🞏 Bisexual🞏 Heterosexual/straight | 🞏 Homosexual🞏 Other | 🞏 Prefer not to say |
| How would you describe your ethnic origin: | **White**🞏 British🞏 Irish🞏 Gypsy or Irish Traveller🞏 Any other White background | **Black or Black British**🞏 African🞏 Caribbean🞏 Any other Black background | **Mixed**🞏 White & Asian🞏 White and Black African 🞏 White and Black Caribbean🞏 Any other mixed background |
| **Asian or British Asian**🞏 Bangladeshi🞏 Indian🞏 Pakistani🞏 Chinese | **Other Ethnic groups**🞏 Arab🞏 Any other ethnic group | 🞏 Prefer not to say |
| What is your religion or belief: | 🞏 Agnostic🞏 Atheist🞏 Buddhist🞏 Christian🞏 Hindu | 🞏 Jain🞏 Jewish🞏 Muslim🞏 No religion | 🞏 Other🞏 Pagan🞏 Sikh🞏 Prefer not to say |
| Pregnancy and maternity | Are you pregnant?🞏 Yes🞏 No🞏 Prefer not to say | Have you given birth within the last 12 months?🞏 Yes🞏 No🞏 Prefer not to say |
| The Equality Act 2010 defines a person as having a disability if she/he has a physical or mental impairment that has a ‘substantial’ and ‘long term’ negative effect on his/her ability to do normal daily activities. |

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| Are your day to activities limited because of a health problem or disability which as lasted, or is expected to last, at least 12 months? | 🞏 Yes🞏 No🞏 Prefer not to say | If you have answered ‘yes’, please state the type of impairment. Please tick all that apply. If none of the categories apply, please mark other.  | 🞏 Physical impairment🞏 Sensory impairment🞏 Learning disability/difficulty🞏 Long-standing illness🞏 Mental health condition🞏 Developmental condition🞏 Other |