

THE MICK JAGGER CENTRE/DARTFORD GRAMMAR SCHOOL
Shepherds Lane, Dartford, Kent. DA1 2JZ
Tel: 01322 291100
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*****PLEASE PRINT CLEARLY IN BLACK INK*****

APPLICATION FORM Post:		Closing Date:	
Section 1 PERSONAL DETAILS			
Surname		Forename(s)	Title
Previous surname(s)		NI No	
Address			
Post Code			
Telephone	Home: Mobile:	Work: Fax:	
e-mail			
Work Permit details, (if appropriate)			
Section 2 PRESENT OR MOST RECENT EMPLOYMENT			
Employer's name & address			
Job title		Full/Part-Time	
Main duties			
Date of appointment		Notice required	
Date and reason for leaving (if appropriate)			
Section 3 REFERENCES			
Please give details of two referees who are able to describe your suitability for this post. These should be your present or most recent employers, unless you have not worked before.			
Name	Name		
Capacity in which known	Capacity in which known		
Company/Business	Company/Business		
Address	Address		
Post Code	Post Code		
Telephone	Telephone		
Fax	Fax		
e-mail	e-mail		
Please confirm that references may be taken up before interview			Yes <input type="checkbox"/> No <input type="checkbox"/>
Please give any dates when you are not available for interview:			
If your referees knew you by another name, write that name in this space:			

Section 4 PREVIOUS EMPLOYMENT**(List your previous posts starting with the most recent, explaining any gaps in your job history. Please use a separate sheet if necessary).**

Employer's name & address	Full / Part-Time	Job title & brief description of duties undertaken	Dates employed		Reason for leaving
			From (mm/yy)	To (mm/yy)	

Section 5 EDUCATION / TRAINING

Please give details of any qualifications you have obtained.

Names of Schools/Institutions	Dates		Qualifications and Grades
	From	To	
Secondary School			
College/Further Education			
Higher Education			

Please give details of any training courses you have attended. If you have attended many training events please list these on a separate sheet and attach.

Training Provider	Dates		Qualifications and Grades
	From	To	

Section 6 PERSONAL INTERESTS, OR ACTIVE INVOLVEMENT OUTSIDE WORK
(e.g. Youth Leader)

Section 7 GENERAL EXPERIENCE AND FURTHER INFORMATION

Tell us how your experience, skills, training and/or qualifications in either paid or unpaid work, or through study, meet the selection criteria for this post. If there is insufficient space you may wish to attach this information on a separate sheet.

Section 8 PROTECTION OF CHILDREN

Disclosure of criminal background is required of those with substantial access to children.
 You are required to give details as this post, for which you are applying, is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (exceptions) (Amendment) order 1986. **A subsequent offer of appointment will be dependent upon the completion of a satisfactory Enhanced Criminal Records Bureau check.**

Have you ever received a caution, reprimand or criminal conviction? If not, simply enter 'NIL' below. If you have, the details must be listed below, together with any pending criminal action or court hearings against you. You must declare all convictions that you have, including motoring offences and all convictions that have become "spent".

Date of caution, reprimand, conviction or pending hearing	Offence	Sentence

Are there any restrictions to your residence in the UK which might affect your right to take up employment in the UK? Yes No
 If YES, please provide details:

Section 9 DECLARATION

I understand that any employment, if offered, will be subject to the information on this form being correct, and I can confirm that no valid information has been willfully withheld. I understand that if I am appointed, I am liable to dismissal without notice if the information on this form is later proved to be inaccurate.

Please delete where applicable:
 I am/am not related to any senior member of staff or governor
 I am prepared to undergo a medical examination if required
 I can produce the original documents of my qualifications

Signature: Date:

If you are returning this application form by post, please sign and date. If returning by e-mail you will be asked to sign a copy of this document before any offer of employment is made.

(The post will be subject to the terms and conditions of the Dartford Grammar School contract)

Section 10 DATA PROTECTION ACT 1998

I hereby give my consent for personal information (including equalities monitoring data) provided as part of this application to be held on computer or other relevant filing systems and to be shared with other accredited organisations or agencies in accordance with the Data Protection Act 1998.

Signature:

Please indicate where you saw the advertisement for this position:

TES On-line	<input type="checkbox"/>	School Website	<input type="checkbox"/>
TES Publication	<input type="checkbox"/>	Kent Teach	<input type="checkbox"/>
Other (please state).....			

EQUALITIES MONITORING INFORMATION

This section of the form is **CONFIDENTIAL** and will be detached from your application prior to interview.

Dartford Grammar School recognises and actively promotes the benefits of a diverse workforce and is committed to treating all employees with dignity and respect regardless of race, gender, disability, age, sexual orientation, religion or belief. We therefore welcome applications from all sections of the community. It will greatly assist us if you provide as much information as possible, but you are not obligated to do so.

ETHNIC ORIGIN (These are approved by the commission for Racial Equality)

Please tick one box only, indicating the category that best describes your ethnic origin.

1. White

- British
Irish
Any other white background
Please specify:

4. Asian or Asian British

- Bangladeshi
Indian
Pakistani
Any other Asian background
Please specify:

2. Black or Black British

- African
Caribbean
Any other Black background
Please specify:

5. Chinese

6. Any other ethnic group

Please specify:

Mixed

- #### **3.**
- White & Asian
White & Black African
White & Black Caribbean
Any other Mixed background
Please specify:

GENDER

Male Female

AGE RANGE

Up to 19 20 – 25 26 – 35
36 – 45 46 – 55 56 – 65
Over 65

DISABILITY

We want to ensure that disabled people are considered on an equal basis by providing appropriate access and equipment. To help us to do this, please answer the following questions:

Do you consider yourself to be disabled? Yes No

If YES, do you consider yourself to be disabled under the terms of the Disability Discrimination Act? Yes No

The Disability Discrimination Act 1995 defines disability as ‘a **physical or mental impairment which has a substantial and long-term adverse effect on an individual’s ability to carry out normal day-to-day activities.**’

Is there anything you would particularly like to tell us about your disability?