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|  | Support Staff Application Form |

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| **Please complete in black ink or type**  **(This document is available in additional formats, e.g. braille or large print on request)**  **Completed Application Forms are to be returned directly to the School.** |

|  |  |  |  |
| --- | --- | --- | --- |
| Post for which you are applying |  | Ref number |  |

|  |  |
| --- | --- |
| Where did you see the post advertised? (ie name of website, newspaper etc) |  |

## Personal details

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Title |  | First name | |  | Surname |  | |
| Any former name(s) | | |  | |  | |  |
| Home address | | |  | | Home phone no | |  |
|  | | |  | | Mobile phone no | |
|  | | |  | | Email address | |
| Postcode | | |  | | | | |

## Current or most recent employment

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Job title |  | | | | | | | | |
| Start date |  | | | Leaving date (if applicable) | |  | | Notice required |  |
|  | | | | | | | | | |
| Current salary | |  | | | Grade (if applicable) |  | | | |
|  | | | | | | | | | |
| Employers name | | |  | | | | | | |
| Employers address | | |  | | | | Work phone no |  | |
|  | | |
| Duties and responsibilities | | |  | | | | | | |
| Reason for leaving (if applicable) | | | |  | | | | | |
| Are you able to take up employment in the UK with no current immigrations restrictions? | | | | | | | | | |

## Employment history

**Please start with the most recent after that shown under current or most recent employment on page 1.**

**You must account for all paid/unpaid/voluntary employment since leaving full time education explaining any breaks.**

**Please photocopy and attach additional pages if necessary providing the same information outlined below.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Start date |  | | | | Leaving date |  |
| Employers name and type of business | | | |  | | |
| Employers address | | | |  | | |
| Position held |  | | | | Salary on leaving |  |
| Duties and responsibilities | | |  | | | |
| Reason for leaving | |  | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Start date |  | | | | Leaving date |  |
| Employers name and type of business | | | |  | | |
| Employers address | | | |  | | |
| Position held |  | | | | Salary on leaving |  |
| Duties and responsibilities | | |  | | | |
| Reason for leaving | |  | | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| Start date |  | | | | Leaving date |  |
| Employers name and type of business | | | |  | | |
| Employers address | | | |  | | |
| Position held |  | | | | Salary on leaving |  |
| Duties and responsibilities | | |  | | | |
| Reason for leaving | |  | | | | |

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| **Health**  **Please note that if offered a post you will be required to complete a medical questionnaire and may be asked to attend a medical examination** |

## Education

**Please state qualifications gained.**

**(If you are appointed we will need to see your original professional qualification certificates)**

|  |  |  |  |
| --- | --- | --- | --- |
| Schools, Colleges, Universities or Institute of Further Education attended  (including part-time) | Date  From | Date  To | Qualifications gained including subjects, grades or results expected, details of awarding body and date of award |
|  |  |  |  |

|  |
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| Any other relevant qualifications or records of achievement (e.g. courses attended), including membership and status of any relevant Professional or Technical Associations |
|  |

## General experience and further information

**(Please photocopy and attach additional sheets if necessary, making sure you number them clearly)**

Please use this section to tell us how you feel you meet the requirements of the Person Specification.

Give as much information as necessary to demonstrate the abilities, skills, experience and knowledge you have gained. This could include voluntary work, leisure interests and any other activities that you consider relevant to this position.

**If you are a disabled person but are unable to meet some of the job requirements, specifically because of your disability, please address this clearly in this section. If you meet all the other criteria you will be shortlisted and we will explore jointly with you if there are ways in which the job can be changed to enable you to meet the requirements. This could include reasonable adjustments to equipment, premises or job duties.**

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## General experience and further information (Continued)

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## Additional information

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|  | | | | |
| We are able to make provision for people with special needs. Such adjustments may include arranging a signer or changing location of the interview if access to an upper floor office is not possible. Is there any special help which you may require for interview or throughout the application process? |  | Yes |  | No |
|  |  |  |  |
| If yes, what help would you like? | | | | |
| Have you a clean/full driving licence?\* |  | Yes |  | No |
| Type of licence:  *\* The enclosed details will say whether a driving licence is needed for this post* | | | | |
| Have you previously been employed by London Borough of Lewisham |  | Yes |  | No |
|  | | | | |
| Have you ever received a redundancy payment or enhanced retirement benefit from any |  | Yes |  | No |
| organisation? |  |  |  |  |
| If yes please state from which organisation (s) and date(s) of payment: | | | | |
| Do you require a Certificate of Sponsorship (work permit)? |  | Yes |  | No |
| Please indicate any dates on which you will not be available for interviews: | | | | |

# References

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| **External applicants**: When considering which referees to include, please make sure that at least 3 years of your most recent experience is covered. Please also ensure that one of your referees is your current Line Manager or your most recent line manager if you are not in paid employment at the moment. If you are a School, College or University leaver one of your referees should be your Headteacher or Tutor.  **Please note that we reserve the right to approach any of your previous employers for a reference.**  **Internal Applicants**: Please give the name and contact details of your current line manager.  1) Name: Position Held:  Organisation:  Address:  Telephone No: Ext:  Email address:  How do you know this person? (e.g. as your line manager, other colleague, tutor, headteacher, friend etc)  Are you in any way related to any of your referees other than professionally? YES / NO (please delete as necessary)  2) Name: Position Held:  Organisation:  Address:  Telephone No: Ext:  Email address:  How do you know this person? (e.g. as your line manager, other colleague, tutor, headteacher, friend etc)  Are you in any way related to any of your referees other than professionally? YES / NO (please delete as necessary) |

# Declaration

I hereby declare \* that to the best of my knowledge, I am not a spouse, partner, child or relative of an existing member or employee of the Council, nor do I have a close personal or business or potential business relationship with any such person.

**Signed**: **Date**:

*\*If you are unable to make the declaration, you should strike it out and state in the space below any relationship of the nature referred to.*

Please indicate if someone assisted you to complete this form YES / NO (please delete as necessary)

I certify that the information provided is correct and agree that it should form part of the basis of my engagement. I authorise the London Borough of Lewisham to check the information that I have supplied. I understand that falsification of qualification or information may lead to withdrawal of an offer of employment or dismissal without notice.

**Our stringent pre employment checks reflect our commitment to protecting our service users. By signing this application form, you are giving the London Borough of Lewisham permission to approach any of your former employers for a reference for the purposes of checking your work history.**

**Signed**: **Date**:

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| **Data Protection Act 1998**  The personal information supplied by you on this application form and in any accompanying documents will be used by Lewisham Council and any other appointed agent, for the purpose of appointment to the post applied for and to allow monitoring the fairness of the recruitment and selection process.  Furthermore, the information may be used to consider a complaint regarding the selection process and/or defend Lewisham Council against any legal action undertaken associated with the fairness of the selection process by any interested parties.  It is also important to stress that certain information you supply will be used for verification purposes and we may need to contact third parties to confirm facts contained within the application.  Where you are have been successfully appointed this information will be retained for the period you are employed and a subsequent 7 years in standard cases, 25 subsequent years where you have been employed to work with children and vulnerable persons and 40 years if you will come into contact with Asbestos as part of your duties.  However, if you are unsuccessful your information will be retained for 12 months after the appointment to post.  I have read and understood the above statement and consent to the personal data submitted with this application form being used for the purposes described. The authority is under duty to protect the public funds it administers, and to this end may use the information you have provided on this form within this authority for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for this purpose.  For further information on how Lewisham Council uses personal information please contact dpa@lewisham.gov.uk  **Signed: Date:**  Canvassing of employees or other members of the Council or any Committee of the Council directly or indirectly for any appointment under the Council shall disqualify the candidate concerned for that appointment. |

## Personnel monitoring information

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Lewisham Council has an equal opportunities policy and is keen to ensure that it is working efficiently. The information you provide in this section will be used for statistical monitoring only and is not part of the interview selection process.  (Please tick the appropriate box) | | | | | | | | | | | | | | | | | | | | | | | |
| **Gender, Age and Date of Birth:** | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | Female | | | Age: | | | | | | | | | Date of birth: | | | | | | | | | |
|  |  | Male | | |  | | | | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| **Ethnic Origin:** How would you define your ethnic origin. (2001 Census categories) | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| **White** | | | | | | | | | **Mixed** | | | | | | | | **Asian or Asian British** | | | | | | |
|  |  | British | | | | | | | |  | White and Black Caribbean | | | | | | |  | Indian | | | | |
|  |  | Irish | | | | | | | |  | White and Black African | | | | | | |  | Pakistani | | | | |
|  |  | Turkish/Turkish Cypriot | | | | | | | |  | White and Asian | | | | | | |  | Bangladeshi | | | | |
|  |  | Any other white background | | | | | | | |  | Any other mixed background | | | | | | |  | Tamil | | | | |
|  |  |  | | | | | | | |  |  | | | | | | |  | Any other Asian background | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| **Black or Black British** | | | | | | | **Chinese or other ethnic group** | | | | | | | | | | **Decline to state** | | | | | | |
|  |  | Caribbean | | | | | | | |  | Chinese | | | | | | |  |  | | | | |
|  |  | African | | | | | | | |  | Vietnamese | | | | | | |  | | | | | |
|  |  | Any other black background | | | | | | | |  | Any other ethnic group | | | | | | |  | | | | | |
|  |  |  | | | | | | | |  |  | | | | | | |  | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| **Sexual Orientation:** How would you define your sexual orientation. | | | | | | | | | | | | | | | | **Religion/Belief:** What is your religious belief. | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| Bisexual | | |  |  | | | | | | | | | | | | Buddhist | | | |  | Jewish |  |  |
| Gay | | |  |  | | | | | | | | | | | | Christian | | | |  | Muslim |  |  |
| Heterosexual | | |  |  | | | | | | | | | | | | Hindu | | | |  | Sikh |  |  |
| Lesbian | | |  |  | | | | | | | | | | | | Other | | | |  | Decline to state |  |  |
| Decline to state | | |  |  | | | | | | | | | | | |  | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| **Do you consider yourself disabled?** | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | Yes | | | |  | | No | | | |  | | | Decline to state | | | | | | | | |
| (Note: the Disability Discrimination Act says that this would be “a substantial or long term physical or mental impairment or health issue which could adversely affect your ability to carry on normal day to day activities”)  Examples of Disabilities – the following list of conditions or impairments is given as a guide only and is not meant to be exclusive. We have provided this list as it may help you to answer the question  **Hearing, speech or visual impairments**  (if you wear glasses or contact lenses this is not normally considered a disability)  **Co-ordination, dexterity or mobility**  (eg polio, spinal cord injury, back problems, repetitive strain injury)  **Mental health**  (eg schizophrenia, depression, severe phobias)  **Speech Impairment**  (eg stammering)  **Learning Disabilities**  (eg Down’s Syndrome)  **Other physical or medical conditions**  (eg diabetes, epilepsy, arthritis, cardiovascular conditions, haemophilia, asthma, cancer, facial disfigurement, sickle cell, dyslexia, etc) | | | | | | | | | | | | | | | | | | | | | | | |

**REHABILITATION OF OFFENDERS ACT 1974**

This page will be kept separate from the rest of your application form –

it will not be sent to the selection panel.

Only complete this section of the form if the post for which you are applying is subject to a Criminal Records Bureau (CRB) check.

*(this will be indicated in the advert and job details)*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** | | | |  | | | | |
| **Post Applied for** | | | |  | | **Ref No** | |  |
| **REHABILITATION OF OFFENDERS ACT**  Because of the nature of the work for which you are applying, this post 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) Order 1975. Applicants are therefore not entitled to withhold information about convictions, which for other purposes are regarded as “spent” under the provisions of the Act, and in the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action by the Council. Convictions within the Armed Services, outside the UK or disciplinary action by certain professional bodies must also be included. Any information given will be completely confidential and will be considered only in relation to posts to which the Order applies.  **CRIMINAL CONVICTION**  Do you have any criminal convictions, cautions, reprimands, final warnings, police enquiries or pending prosecutions against you, including any convictions which are regarded as “spent” under the above Act? | | | | | | | | |
| **Yes** |  | |  | | | | | |
| **No** |  | |  | | | | | |
|  | | | | | | | | |
| Signed: | |  | | | Date: | |  | |
| Any details you provide will be treated in the strictest confidence and will not automatically exclude you from being considered for this or any other vacancy (see our policy on Rehabilitation of Offenders which is enclosed in the pack) . The nature of the offence, how long ago it took place, your age at the time and any other relevant factors may be considered when a decision is made. Please note that some convictions are never considered “spent” under the terms of the Act.  For more information on spent convictions visit http://publish.lawontheweb.co.uk/rehabact.htm  If you are invited for interview, you will be asked to provide details of any criminal convictions, cautions, reprimands, final warnings, police enquiries or pending prosecutions (whether spent or not). Once you receive your interview letter, could you send details in an envelope with your name and the post for which you are applying on the back of the envelope and mark it “PRIVATE AND CONFIDENTIAL ADDRESSEE ONLY” to the Headteacher of the recruiting School.  If the selection panel agree to appoint you to the post, the envelope will be forwarded, unopened, to a nominated CRB countersignatory officer who will recommend to Lewisham’s CRB Panel whether or not your appointment can proceed. This decision will depend on the nature of the conviction and the post applied for. If you are not selected for appointment, the envelope will be destroyed in a secure way. | | | | | | | | |

