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| Image preview | **St. Peter’s Centre**  A Medical Short Stay School  Confidential  **Job Application Form** |

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| **Information for Applicants:**  Please complete this form in **black ink** or **type** in the spaces provided. If you need more space than is provided, please continue on an additional sheet of paper. Please note that we **cannot accept CVs**. | | |
| Please return your completed form by email or post: | [admin@sphpru.surrey.sch.uk](mailto:admin@sphpru.surrey.sch.uk)  St. Peter’s Centre  Corby Drive,  Englefield Green,  Egham  Surrey. TW20 0RX | Ref. No. *(Office Use Only)* |
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| The deadline for receipt of completed applications is: | **Monday 2nd September 2025** | |

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| **Details of Post Applied For:** | |
| Job Title | TA Fixed term, Maternity Cover– PS3 |
| Job Reference Number (if any) |  |
| Please confirm the date you would be able to start work, if successful |  |

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| **Personal Details:** | | | | | | | | | | |
| Title |  | | First Name(s) | | |  | | | | |
| Surname | |  | | | | | | | Date of Birth[[1]](#footnote-1) |  |
| If you have previously been known by another name, please specify: | | | |  | | | | | | |
| Address | |  | | | | | | | | |
| Contact Details | | Please only include contact numbers or email addresses that you are happy for us to use. | | | | | | | | |
| Daytime Contact Number: | | |  | | | | | |
| Evening Contact Number: | | |  | | | | | |
| Mobile Number (if different): | | |  | | | | | |
| Email Address: | | |  | | | | | |
| National Insurance Number | | | | |  | | | | | |
| DfE Registration Number | | | | |  | | | | | |
| Do you hold Qualified Teacher Status (QTS) or Qualified Teacher Learning and Skills (QTLS) status? | | | | | YES | | NO | If yes, please confirm below whether you hold QTS or QTLS and the date it was awarded: | | |
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| Do you currently have the right to work in the UK? | | | | | YES | | NO | If no, please specify your circumstances below: | | |
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| **Education and Qualifications:** | | | |
| Please also include any relevant professional qualifications. | | | |
| Name of Institution (e.g. School, College or University) | Dates Attended | | Courses/Subjects Taken and Examinations Results or Award |
| From (Month/Year) | To (Month/Year) |
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| **Membership of Professional Bodies:** | | |
| Please give details of any relevant professional bodies to which you belong. | | |
| Name of Professional Body | Membership Status | Date Membership Commenced |
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| **Professional Development:** | | | | |
| Please give details of any courses undertaken which you have not already detailed and which you consider to be relevant to this application. | | | | |
| Course Title | Course Provider | Dates Attended | | Award (if any) |
| From (Month/Year) | To (Month/Year) |
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| **Details of Present or Most Recent Teaching Appointment:** | | | | | | | | | | | | |
| Post Held | | | | |  | | | | | | | |
| Responsibilities Held (If Applicable) | | | | |  | | | | | | | |
| Dates Employed From and To (Month/Year) | | | | | | |  | | | | | |
| School Name and Address | | |  | | | | | | | | | |
| Name of Local Authority (If Applicable) | | | |  | | | | | Type of School (Community, Aided, Independent etc) | | |  |
| Salary Details | Scale, e.g. Main Scale: | | | | |  | | | | Salary Point: | |  |
| Alternatively, please quote annual salary if you are/were not on national pay scales (if part-time, specify the FTE): | | | | | | | | | | | £ |
| Additional allowances (state type and annual value): | | | | | | |  | | | | |
| Total annual salary (if you are part-time, specify FTE): | | | | | | | | | | £ | |
| Reason for Leaving | |  | | | | | | | | | | |

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| **Previous Teaching Appointments:** |
| Please give details of **all previous teaching appointments** you have undertaken, starting with the most recent. Details of employment undertaken outside of teaching, and any other gaps in employment, should be recorded on pages 5-6. Please use a continuation sheet if necessary. |

| **School/College/Employer Details** | | **Post Details** | **Dates Employed and Reason for Leaving** |
| --- | --- | --- | --- |
| 1. | School Name: | Title of Post: | From (Month/Year): |
|  |  |  |
| To (Month/Year): |
| Type of School and NOR (approx.): | Responsibilities Held (if applicable): |  |
|  |  | Reason for Leaving: |
|  |
| Local Authority (if applicable): | Additional Allowances (type/value): |
|  |  |
| Pupil Age Range / Gender: | Key Stage / Pupil Age Range Taught: |
|  |  |
| 2. | School Name: | Title of Post: | From (Month/Year): |
|  |  |  |
| To (Month/Year): |
| Type of School and NOR (approx.): | Responsibilities Held (if applicable): |  |
|  |  | Reason for Leaving: |
|  |
| Local Authority (if applicable): | Additional Allowances (type/value): |
|  |  |
| Pupil Age Range / Gender: | Key Stage / Pupil Age Range Taught: |
|  |  |
| 3. | School Name: | Title of Post: | From (Month/Year): |
|  |  |  |
| To (Month/Year): |
| Type of School and NOR (approx.): | Responsibilities Held (if applicable): |  |
|  |  | Reason for Leaving: |
|  |
| Local Authority (if applicable): | Additional Allowances (type/value): |
|  |  |
| Pupil Age Range / Gender: | Key Stage / Pupil Age Range Taught: |
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| 4. | School Name: | Title of Post: | From (Month/Year): |
|  |  |  |
| To (Month/Year): |
| Type of School and NOR (approx.): | Responsibilities Held (if applicable): |  |
|  |  | Reason for Leaving: |
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| Local Authority (if applicable): | Additional Allowances (type/value): |
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| Pupil Age Range / Gender: | Key Stage / Pupil Age Range Taught: |
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| **Other Employment:** | | | | |
| Please give details of any **other periods of employment** you have undertaken which you have not included on page 4, starting with the most recent. Any gaps in your employment and/or training and education history will be explored with you if you are called for interview. Please use a continuation sheet if necessary. | | | | |
| Employer’s Name and Address | Dates Employed From and To (Month/Year) | Position Held | Salary and Benefits | Reason for Leaving |
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| **Periods When Not Working:** | | |
| Please give details below of any voluntary work you have not detailed elsewhere in your employment history, or reasons for other periods of time when you have not been employed since leaving secondary education. | | |
| Date From (Month/Year) | Date To (Month/Year) | Reason |
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| **Statement of Application:** | | | | | | | | | | | |
| You are invited to provide further information in support of your application. Please make full use of this section and continue on additional sheets if necessary. Please refer to the person specification for the post and also include:   * The reasons why you are applying for this post; * The personal qualities and experience that you feel are relevant to your suitability for the post; * Key responsibilities and achievements in your present or most recent job which are relevant to this application; * Details of any relevant interests or activities. | | | | | | | | | | | |
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| **Referees:** | | | | | | | | | | | |
| * The first referee provided **must** be your present or most recent employer, unless you have not been in employment before. If you are not currently working with children but have done so in the past, your second referee **must** be that employer. * If any of your references relate to your employment at a school or college your referee **must** be the Headteacher or Principal. If you are a serving (or ex) Headteacher or Principal, your referee should be the Chair of the Governing Body. * If you are currently working with children, your present employer will be asked about any disciplinary offences relating to children (whether current or time expired), whether you have been the subject of any substantiated child protection concerns and, if so, the outcome of these investigations. If you are not currently working with children but have done so previously, these issues will be raised with your former employer. * Please do not name relatives or people acting solely in their capacity as friends as referees. | | | | | | | | | | | |
| **Referee 1** | | | | | | **Referee 2** | | | | | |
| Title (Miss/Mr etc) | | | | |  | Title (Miss/Mr etc) | | | | |  |
| Name |  | | | | | Name |  | | | | |
| Occupation | | |  | | | Occupation | | |  | | |
| Address | |  | | | | Address | |  | | | |
| Tel. Number | | | |  | | Tel. Number | | | |  | |
| Fax Number | | | |  | | Fax Number | | | |  | |
| Email Address | | | |  | | Email Address | | | |  | |
| In what capacity do you know the referee? | | | |  | | In what capacity do you know the referee? | | | |  | |

| **Reasonable Adjustments to the Shortlisting Process:** |
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| The School welcomes applications from disabled people. Please indicate in the box below if there is anything that we need to do, or take into consideration, to ensure that the shortlisting process is fair in relation to a disability. |
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| Candidates who are invited for interview will be asked in the invitation letter if they require any adjustments to be made to the interview or other selection activities. |

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| **Declarations:** |

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| This post is **exempt from the Rehabilitation of Offenders Act 1974**. If you are appointed you will be required to undertake an Enhanced Disclosure & Barring Service (DBS) check. You are required to declare any unspent convictions, cautions, warnings and bind-overs you may have, regardless of how long ago they occurred, as well as any pending criminal proceedings or current police investigations. Having a criminal record will not necessarily prevent you from taking up appointment; this will depend on the nature of the offence(s) and their relevance to the post you are applying for. However, should you **not** declare any of the above and this is subsequently revealed, e.g. through the DBS check, then this may place your appointment in jeopardy. | | | | | |
| **Please answer the following questions:** | | | | | |
| Do you have any unspent convictions, cautions, warnings or bind-overs that are not "protected" as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013) **and/or** are you the subject of a current police investigation or have criminal proceedings pending against you? | | | | YES/NO | |
| Are you on the Children’s Barred List (previously List 99 and PoCA list) or have you ever been disqualified from working with children or been subject to any sanctions imposed by a regulatory body (e.g. General Teaching Council, Teaching Agency)? | | | | YES/NO | |
| **It is a criminal offence for barred individuals to seek, or to undertake, work with children.**  If you have answered ‘YES’ to either of the above, please provide **further details on a separate sheet in a sealed envelope marked ‘CONFIDENTIAL’.** | | | | | |
| **Are you currently registered with the DBS Update Service (*service only available from 17.06.13*)?** | | | | | YES/NO |
| **If YES, please provide the information below. If NO, please proceed to the next section.** | | | | | |
| DBS Registration Number |  | Annual Registration Renewal Date | |  | |
| Level of check obtained at point of registration? (*select one*) | | | STANDARD / ENHANCED | | |
| Which workforce was your check requested for at point of registration? (*select one*) | | | CHILDREN / ADULT / ADULT & CHILDREN / OTHER | | |
| **Declaration:** By signing this application form and providing the information above I understand that I am authorising the school to consult the DBS Update Service in the context of its recruitment and safeguarding procedures and agree to provide the relevant disclosure certificate to facilitate this process. | | | | | |

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| **Declaration of Relationships:** | |
| Are you related to, or do you have a close personal relationship with, any elected member or senior officer of the local authority or a member of staff or governor of the school? | YES / NO |
| If YES, please provide below his/her name and role, and state your relationship: | |
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| I declare that the information I have given on this form is correct. I understand that providing false or misleading information is an offence which could result in my application being rejected, or, in the event of employment being obtained, may result in disciplinary action being taken, up to and including summary dismissal. It could also result in a referral to the police. I understand that my application form will be retained on file for a period of six months (or transferred to my personnel file in the event that my application is successful) and give my consent for the personal data supplied to be used for the purposes of recruitment and selection. | | | |
| Signature of Applicant |  | Date |  |
| If you have submitted your application electronically, you will be asked to sign your application form in the event that you are shortlisted and called for interview. | | | |
| **Thank you for your application. Please enclose a stamped addressed envelope if you require acknowledgement of its receipt. Otherwise, in the interest of public economy, only shortlisted applicants will receive further notification.**  **Retention of Application Forms:** It is the School’s policy to retain all application forms for unsuccessful applicants for a period of six months, after which time they are securely destroyed. If another suitable vacancy arises during that period which we think might suit your skills and experience, we may contact you to make you aware of the vacancy. If you **do not** wish us to use your application form in this way, please tick this box ❑ | | | |

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| **Equality Monitoring Form** | | | | | | | | | |
| St. Peter’s Centre aims to select staff on merit, irrespective of race, sex, disability, age or other protected characteristics. In order to monitor the effectiveness of the School’s Equality Policy and recruitment procedures, we ask that all applicants complete this form and return it with their application. In accordance with the Data Protection Act 2018, the information provided will only be used for the purposes of equality monitoring and to inform improvements to our policies. **The form will be separated from your application upon receipt and will not be shared with the selection panel.** Thank you. | | | | | | | | | |
| Post Applied For: |  | | | | | Where did you see this post advertised? | | |  |
| ***Please tick whichever boxes apply. If you prefer not to provide certain information, please leave the box blank.*** | | | | | | | | | |
| **Gender:** | Female |  | Male |  |  | |  |  | |

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| **Age:** | 16-24 |  | 25-34 |  | 35-44 |  | 45-54 |  | 55-64 |  | 65+ |  |  |

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| **Disability:** | Do you consider yourself to have a disability? | Yes |  | No |  |  |

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| **Ethnicity:** | Please tick **one** category below. The categories are based on the population census. | | | | |
| **Asian, Asian British, Asian English, Asian Scottish or Asian Welsh:** | | |  | **Chinese, Chinese British, Chinese English, Chinese Scottish, Chinese Welsh or other ethnic group:** | |
| Bangladeshi | |  |  | Chinese |  |
| Indian | |  |  | Any other ethnic background (specify if you wish): |  |
| Pakistani | |  |  |
| Any other Asian background (specify if you wish): | |  |  | **Mixed:** | |
|  | White and Asian |  |
| **Black, Black British, Black English, Black Scottish or Black Welsh:** | | |  | White and Black African |  |
| African | |  |  | White and Black Caribbean |  |
| Caribbean | |  |  | White and Chinese |  |
| Any other Black background (specify if you wish): | |  |  | Any other Mixed background (specify if you wish): |  |

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| **White:** | | | | |
| British |  |  | Scottish |  |
| English |  |  | Welsh |  |
| Irish |  |  | Any other White background (specify if you wish): |  |

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| **Prefer Not Say:** |  |

All the information collected in this form is necessary and relevant to enable us to process your application for employment.

To the extent that you have shared any special categories of personal data\*this will not be shared with any third parties unless there is a legal obligation to do so.

If the application is successful, the information you have provided on this form will become part of your personnel file, which shall be retained throughout the duration of your employment within our organisation and afterwards in accordance with our data retention policy.

If you are unsuccessful, your application form and any documents you have submitted in support of you application will be destroyed after a period of 6 months.

We will keep a record of your consent as evidence that we have obtained your consent to collect and process data you have provided on this application form.

You have the right to withdraw your consent at any time and can do so by informing our organisation’s Data Office.

For more information on how we use the information you have provided please see our Privacy Notice for Job Applicants which is attached to this application form.

To complain about how we have collected and processed the information you have provided on this form, you can make a complaint to our organisation by following the complaints procedure on our website.  If you are unhappy with how your complaint has been handled you can contact the Information Commissioners officer via their website at: ico.org.uk

Please sign below to confirm your consent:

Request for consent…………………………………………………………………………………………………………………………….

\*Article 9(1) GDPR sets out the special categories of personal data as follows: “personal data revealing racial or ethnic origin, political opinions, religious or philosophical beliefs, or trade union membership, and the processing of genetic data, biometric data for the purpose of uniquely identifying a natural person, data concerning health or data concerning a natural person’s sex life or sexual orientation….”

1. The Management Committee complies with the Equality Act 2010 and does not discriminate against job applicants on the grounds of age. Date of birth and other key dates are requested of applicants to meet the recommendations of the DfE statutory guidance “Safeguarding Children and Safer Recruitment in Education” (ref: DfES2006); these are used for identification purposes and to verify that a full education and employment history has been provided. [↑](#footnote-ref-1)