



# APPLICATION FORM FOR SUPPORT STAFF POST

FOR OFFICE USE

App Rcvd.....

Refs .....

Refs Rcvd.....

Interview

Please type or use black ink/ballpoint. Use Block letters.

<b>APPLICATION FOR POST OF:</b>	
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## PERSONAL DETAILS

<b>Last name</b>		<b>Mr/Mrs/Miss/Ms/Dr ....(other)</b>
<b>First names</b>		
<b>Previous name(s)/maiden name</b>		
<b>Home address</b>		
<b>Telephone number and a mobile number if applicable</b>		
<b>Email address</b>		
<b>Date of birth</b>		
<b>National Insurance Number</b>		

## PRESENT POST (if applicable)

<b>Present Post (title)</b>	
<b>Full Time or Part Time</b>	
<b>Name of Employer</b>	
<b>Address (include postcode)</b>	
<b>Telephone Number</b>	

## EDUCATION & TRAINING

Names of Secondary Schools	Dates		Qualifications Gained		
	From	To	Subect	Level	Date

Names of Colleges/Universities	Dates		Full or P/T	Qualifications Gained
	From	To		

## COURSES ATTENDED OVER LAST THREE YEARS

Title	Organising Body	Date (month & year)	Duration

**PREVIOUS WORK HISTORY.**

Please list in chronological order and be explicit about type of post.

Name and address of employer	From	To	Position held and brief description of duties	Reason for leaving

**LETTER OF APPLICATION**

**Please include a letter of application on A4 size paper giving further information in support of your application.**

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**You may wish to attach a copy of your CV.**

**Please indicate where you found details of this post:  
e.g. Echo, Target, LinLine, Horncastle News, School Website**

**Do you consider yourself disabled under the Disability Discrimination Act (DDA)?**                      Yes                      No  
                     

**Have you ever been convicted of a criminal offence or are you at present the subject of criminal charges)?**                      Yes                      No  
                     

BECAUSE OF THE NATURE OF THE WORK FOR WHICH YOU ARE APPLYING, THIS POST IS EXEMPT FROM THE PROVISION OF SECTION 4(II) OF THE REHABILITATION OF OFFENDERS ACT, 1974 BY VIRTUE OF THE REHABILITATION OF OFFENDERS ACT (EXCEPTIONS) ORDER, 1975 AND YOU ARE THEREFORE NOT ENTITLED TO WITHHOLD INFORMATION ABOUT CONVICTIONS WHICH FOR OTHER PURPOSES ARE "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.

Please give details of any absence through ill health (longer than three consecutive days) over the past 12 months:

This post will be subject to a full Criminal Records Bureau check.

**REFERENCES (These will normally be taken up before interview)**

<p><b>NAME &amp; ADDRESS OF YOUR PRESENT OR LAST EMPLOYER:</b></p>   <p><b>POST CODE:</b></p> <p><b>Telephone Number:</b></p>	<p><b>NAME, ADDRESS OF SECOND REFEREE:</b></p>   <p><b>POSTCODE:</b></p> <p><b>Telephone Number:</b></p>
<p><b>Nature of your employment:</b></p>	<p><b>Occupation:</b></p> <p><i>This person should not be a friend, relative or neighbour</i></p>

**APPLICANT'S STATEMENT**

***I understand that canvassing, directly or indirectly, will be a disqualification.***

***I enclose SAE for notification of result YES/NO***

**Signature of Applicant:**

**Date:**

**Please telephone the School Office if you require acknowledgement of receipt of your application.**

*Queen Elizabeth's Grammar School is an equal opportunities employer. No applicant will be less favourably treated on the grounds of age, race, colour, nationality, ethnic or national origins, gender, marital status or disability.*

## ***GUIDANCE FOR APPLICANTS WITH DISABILITIES***

Information is requested on your job application form about any disability you may have. If you are shortlisted, you will also be asked to provide further information on an Employment Health Questionnaire form.

### **This means:**

In fairness to you, and to enable us to meet our commitments under our Equal Opportunities policy, it is important that you tell us whether you require adjustments to any part of the selection procedure including arrangements for interview. The application form allows you to provide this information. If you are offered the job, any adjustments to the working conditions or environment that may be required to enable you to carry out the duties of the job will be considered in consultation with you.

### **The School defines disability as follows:**

A person has a disability if he/she has a physical or mental impairment that has a substantial and long term adverse effect in his/her ability to carry out normal day-to-day activities where:

- a mental impairment is defined as an impairment resulting from or consisting of a mental illness only if the illness is a clinically well-recognised mental illness;
- long term, means the effect of the impairment has lasted at least 12 months or is likely to last for 12 months or is likely to last for the rest of the person's life;
- normal day-to-day activities are defined as: mobility; manual dexterity; physical co-ordination; continence; ability to lift, carry or otherwise move everyday objects; speech, hearing or eyesight; memory or ability to concentrate, learn or understand; perception of the risk of physical danger. N.B. Any disability which does not have a substantial and long term effect on one or more of them is not considered to be a disability.

### **Other conditions included within the definition of disability not already outlined above are:**

- a recurring condition which has recurred over more than 12 months or is likely to recur over more than 12 months;
- a progressive condition, e.g. cancer, multiple sclerosis, muscular dystrophy or HIV which has, or has had, an effect on normal day-to-day activities;
- people with severe disfigurements, although some with deliberately acquired disfigurements will not be covered;
- people registered as disabled under the Disabled Persons (Employment) Act 1944 on 12 January 1995 and on the date the employment right comes into force, who will be deemed to be covered for 3 years after 2<sup>nd</sup> December 1996. People with a history of disability will also have protection, even if they do not now have a disability.

### **Your Application**

- There is no legal requirement for you to provide information about your disability on this form. However, you are encouraged to do so, particularly where you believe that the information may be relevant to the job application.