|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **SUPPORT STAFF APPLICATION FORM**  ***Committed to equality at work and in our community***    All relevant sections must be completed electronically, there are 2 sections to complete.  A curriculum vitae must not be submitted in place of any information on this form.  Applications should be sent to [recruitment@omegamat.co.uk](mailto:recruitment@omegamat.co.uk)  **PART ONE** | | | | | | |
| 1. **VACANCY INFORMATION** | | | | | | |
| Application for the post of | | | | Network Manager | | |
| By the closing date of | | | | N/A | | |
| Interview date | | | | N/A | | |
| 1. **PERSONAL DETAILS** | | | | | | |
| Surname | | Click here to enter text. | | Title | Click here to enter text. | |
| Previous Surname | | Click here to enter text. | |  |  | |
| First Name(s) | | Click here to enter text. | | Known as | Click here to enter text. | |
| Have you ever been known by any other name? | | | | Choose an item. | | |
| If yes please give details | | | | Click here to enter text. | | |
| Address | | | | Click here to enter text. | | |
| Postcode | | | | Click here to enter text. | | |
| Telephone : Business | | Click here to enter text. | | Private | Click here to enter text. | |
| Mobile Tel : | | Click here to enter text. | | e-mail | Click here to enter text. | |
| (if shortlisted you may be invited to interview via e-mail) | | | | | | |
| Work permit required | | | | Choose an item. | | |
| Work permit expiry date | | | | Click here to enter a date. | | |
| Are you applying for this job as a job sharer? | | | | Choose an item. | | |
| National Insurance Number | | | | Click here to enter text. | | |
| 1. **REFERENCES** | | | | | | |
| Please give details of two people who are not related to you, from whom references about your suitability for the job can be obtained. If presently employed one must be your current employer. If unemployed one must be your most recent employer. In the absence of previous employment experience a reference from your headteacher/ tutor or related to relevant voluntary work is acceptable.  If you are not currently working with children and/or vulnerable adults, but have done so in the past, please supply details of an additional employer by whom you were most recently employed to work with children/vulnerable adults.  We reserve the right to request alternative references during the processing of your application. | | | | | | |
| **1: (Current or most recent employer)** | | | **2:** | | | |
| Name | Click here to enter text. | | Name | | | Click here to enter text. |
| Title (Mr, Mrs etc.) | Click here to enter text. | | Title (Mr, Mrs etc.) | | | Click here to enter text. |
| Occupation | Click here to enter text. | | Occupation | | | Click here to enter text. |
| Address | Click here to enter text. | | Address | | | Click here to enter text. |
| Postcode | Click here to enter text. | | Postcode | | | Click here to enter text. |
| Business Telephone | Click here to enter text. | | Business Telephone | | | Click here to enter text. |
| Home Telephone | Click here to enter text. | | Home Telephone | | | Click here to enter text. |
| Mobile | Click here to enter text. | | Mobile | | | Click here to enter text. |
| Email | Click here to enter text. | | Email | | | Click here to enter text. |
| How long have they known you | Click here to enter text. | | How long have they known you | | | Click here to enter text. |
| In what capacity have they known you: | | | In what capacity have they known you: | | | |
| Choose an item. | | | Choose an item. | | | |
| If the referee knows you by a different name, please state | Click here to enter text. | | If the referee knows you by a different name, please state | | | Click here to enter text. |
| For posts having substantial access to children the school reserves the right to approach any previous employer. | | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **DRIVING LICENCE DETAILS** | | | | | | |  |
| Do you hold a full current licence and access to a vehicle? Choose an item. | | | | |  | |
| If yes, what type of licence? Choose an item. | | | | |  | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | 1. **EDUCATION ATTAINMENTS** | | | | | | Education, training and professional qualifications | | | | | | FROM | TO | Full Name and Address of School / College / University / Institution | Qualifications | | | (Month & Year) | | Gained (with grades) | Subject | | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | | In-service education, training and courses (for previous 3 years) as a participant or course leader. | | | | | | Dates & Duration | Title of Course/Training | | Name of Provider | Qualification (if any) | | Click here to enter text. | Click here to enter text. | | Click here to enter text. | Click here to enter text. | | PROFESIONAL BODIES  Please give details of any professional body of which you are a member. Indicate those obtained by examination. | | | | | | Click here to enter text. | | | | | | **Please note that you will be required to produce evidence of qualifications attained.** | | | | | | | | | |  | |
| 1. **CURRENT EMPLOYMENT DETAILS** | | | | | | |
| Title of present/most recent job | | | Click here to enter text. | | | |
| Name of employer | | | Click here to enter text. | | | |
| Address | | | Click here to enter text. | | | |
| Telephone | | | Click here to enter text. | | | |
| Date appointed | Click here to enter a date. | | Date left if applicable | | Click here to enter a date. | |
| Salary | Click here to enter text. | | Permanent/Temporary | | Choose an item. | |
|  |  | |  | |  | |
| 1. **FULL OCCUPATIONAL HISTORY** | | | | | | |
| Please give details of ALL full and part-time work as well as particulars of ALL paid or unpaid employment experience e.g. commercial experience, raising a family, youth work, voluntary work or periods when you were not employed.  Please complete the columns by entering the most recent first. **PLEASE DO NOT LEAVE ANY GAPS IN THIS HISTORY. (Continue on a separate sheet if necessary)** | | | | | | |
| Type of experience/Post title (paid or unpaid) and reason for leaving | | Name & Address of Employer | | Dates | | |
| From | | To |
| Click here to enter text. | | Click here to enter text. | | Click here to enter text. | |  |
| 1. **WRITE IN SUPPORT OF YOUR APPLICATION HERE – This section must be completed** | | | | | | |
| **A Curriculum Vitae must not be submitted in place of any information required on this form.**  You may, however, wish to submit supplementary evidence to your application form by attaching a maximum of 2 sides of A4 papers.  Please explain how you meet the requirements outlined in the person specification. You should give example of previous paid, unpaid or voluntary experience. | | | | | | |
|  | | | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **PENSION SCHEME** | | | |
| Please confirm whether you currently contribute a Pension Scheme: | | | Choose an item. |
| Are you currently in receipt of an occupational pension? | | | Choose an item. |
| Do you pay into any other pension scheme? | | | Choose an item. |
| If yes, please give details below: | | | |
| Click here to enter text. | | | |
| 1. **DISCLOSURE OF CRIMINAL CONVICTIONS AND POLICE CLEARANCE** | | | |
| A criminal record will not necessarily exclude you from employment. The information provided will be treated as strictly confidential and will only be considered in relation to the job for which you are applying. You are required to disclosure any ‘unspent’ criminal convictions in line with the Rehabilitation of Offenders Act 1974.  However, if you are applying for work which involves substantial opportunity for access to children or vulnerable adults, you are required to give details of **all** criminal convictions, even if they are regarded as ‘spent’. Should you identify that you have a criminal conviction, this will be discussed in confidence at interview.  Do you have any criminal convictions, cautions, reprimands or final warnings or any pending prosecutions? *(You do not need to include cautions, reprimands or warning which are over 5 years old if you are not applying for a post with substantial access to children or vulnerable adults)* | | | |
| Choose an item. | | | |
| If ‘Yes’, give details below: | | | |
| Details of offence & Sentence | | Date | Court or police force who dealt with the offence |
| Click here to enter text. | | Click here to enter text. | Click here to enter text. |
| **Posts that may have substantial opportunity for access to children or vulnerable adults are exempt from the Rehabilitation of Offenders Act and will require a DBS check.**  Successful applicants will be asked to apply for a disclosure and barring disclosure from the disclosure and barring disclosure service.  Further information about disclosures can be found at <https://www.gov.uk/disclosure-barring-service-check/>  **I acknowledge that it is my responsibility as the candidate, if invited for interview, to disclose any information to the panel which may affect working with children/vulnerable adults. Failure to do so may disqualify me from appointment or result in dismissal.** | | | |
| “I certify that the details on this application form are true as far as I know. I understand that if I give false information or withhold relevant information it could result, if engaged, in termination of employment” | | | |
| Signed | Click here to enter text. | Date | Click here to enter a date. |
| 1. **THE ASYLUM AND IMMIGRATION ACT 1996 (SECTION B)** | | | |
| Please refer to the enclosed guidance notes before answering these questions. | | | |
| Do you have or are you entitled to obtain a National Insurance Number? | | | Choose an item. |
| If you have answered ‘No’ to the above question, do you have the right to work in the UK and can you provide the relevant requested information to prove that this is the case? | | | |
| *(Please see guidance notes for details of relevant information)* | | | Choose an item. |
| 1. **DECLARATION OF RELATIONSHIP** | | | |
| Are you or your spouse related by marriage, blood or as a cohabitee to any elected governor/trustee or employee of the Academy Trust? | | | Choose an item. |
| If you are related please give their name and state the nature of the relationship. Failure to disclosure such a relationship may lead to disqualification from the recruitment process or dismissal without notice. | | | |
| Name | Click here to enter text. | Date | Click here to enter a date. |
| 1. **CERTIFICATION / DECLARATION** | | | |
| I certify that to the best of my knowledge, all statements contained in this form are correct and I understand that should I conceal any material fact, I will, if engaged, be liable to termination of my contract of employment. | | | |
| **Signed** | | | |  | Date | Click here to enter a date. |
| Providing false information is an offence and could result in the application being rejected and/or summary dismissal if the applicant has been selected.  All offers of employment are subject to suitable references, qualifications check, satisfactory medical clearance, DBS if relevant to post and Asylum & Immigration checks.  We must protect the public funds we handle so may use the information you have provided on this form to prevent and detect fraud. We may also share this information, for the same purposes, with other organisations which handle public funds.  We will record and hold the information given for personnel, employment, education and training purposes in accordance with the Data Protection Act 1998.  **We should like to take this opportunity to thank you for your interest in the advertised post. If you have not been contacted concerning your application within 1 week of the closing date, please assume you have not been shortlisted for interview.** | | | |  |  |  |

**PART TWO TO BE DETACHED PRIOR TO SHORTLISTING**

|  |  |
| --- | --- |
| 1. **EQUAL OPPORTUNITIES AND MONITORING** | |
| Omega Multi Academy Trust is an equal opportunities employer. As such we welcome applications from people of all backgrounds, irrespective of race, sex, disability, age, sexual orientation, religion or belief.  We need to carry out diversity monitoring in order to make sure our recruitment processes are fair for all and in order to meet our statutory obligations. Please help us to do this by completing this section of the form.  The information given in this section will be used for statistical purposes only and will not form part of the shortlisting or interview process. | |
| 1. **Post applied for** |  |
| 1. **Directorate / Unit** | Click here to enter text. |
| 1. **How would you describe your ethnic origin?** | Choose an item. |
| 1. **Male / Female** | Choose an item. |
| 1. **Are you currently employed?** | Choose an item. |
| 1. **Date of Birth** | Click here to enter a date. |
| 1. **What is your religion** | Choose an item. |

|  |  |
| --- | --- |
| 1. **DISABILITY AND REASONABLE ADJUSTMENTS** | |
| By answering the following questions, you will assist the Academy Trust to comply with its obligations arising from the Disability Discrimination Act 1995(as amended by DDA 2005). You are not compulsorily required to give this information. However, if you advise us that you do have a disability and you meet the essential criteria of the person specification, the Academy Trust will guarantee you an interview.  DISABILITY DEFINITION (DDA 1995 AS AMENDED BY DDA 2005)  “a physical or mental impairment which has a substantial and long-term adverse effect on a person’s ability to carry out normal day to day activities” | |
| DO YOU HAVE A DISABILITY IN ACCORDANCE WITH THE ABOVE DEFINITION? (regardless of whether or not it has an impact on your ability to do the job for which you are applying) | Choose an item. |
| If you do have a disability or health condition, and require particular adjustments or arrangements to facilitate your participation in the selection process, please give details below: | |
| Click here to enter text. | |