**Application form**



# Confidential

Post title: Company:

**This form is also available in alternative formats (computer disk, audio tape and Braille). Please complete using black ink or type.**

This is your opportunity to tell us as much as possible about yourself and will help us make a fair decision in the selection process. Please refer carefully to the information you have been provided for this post.

Please ensure you complete **ALL** sections of the application form. Your application will be treated in the strictest confidence.

**PART 1 : PERSONAL DETAILS**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name: | | | Previous Surname(s): | | | |
| Address: | | | Alternative address: | | |  |
| Postcode: |  | | Postcode: |  | | |
| Telephone – Home: | |  | Mobile: |  | | |
| Work: | |  | Email address: | |  | |
| :  / | | | | | | |

National Insurance Number

(You can obtain this information from the Department of Social Security)

Do you consider yourself to be in good health? Yes No If NO, please provide details

**General**

**Health Declaration**

Removed to comply with the 2010 Equality Act. Please note, for jobs involving working with Children or Vulnerable Adults, the statutory regulations require us to ascertain whether the physical and mental

fitness of persons appointed to such roles is at an appropriate level prior to any confirmation of appointment.

**Superannuation Scheme**

Do you contribute to the a pension scheme? If you contribute to another scheme please provide details:

Yes

No

Have you elected to pay Superannuation contributions for part time work?

Yes

No

1



**Disclosure of relationship**

Are you related to any elected member of the company?

Yes

No

(If YES, please provide details)

How did you become aware of this vacancy?

Media:

Date:

Reference:

**Please indicate two people who can provide references** – one of whom should be your present/most recent employer. Students should include their University/College tutor.

References will be taken up before an offer of employment is made and may be taken up prior to interview.

1. Name:

Address:

2. Name:

Address:

Tel. No.:

Tel.No.:

Email:

Email:

Occupation:

Occupation:

**PART 2 : COMPETENCY**

**Education and Training**

**Original documentation of qualifications will be required prior to an appointment.**

a) Training as a Web designer

Name of Institution(s)

Date from

Date to

Full or Part Time

1.

Month

Year

Month

Year

2.

Degree / Diploma / Title

Subjects

Hons or Pass Grade

Date of Award

1.

Month

Year

2.

b) University, College, etc (other than initial teacher training)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Institute |  | | | |
| Dates | From: |  | To: |  |
| Qualification obtained  Subjects – Main and Subsidiary |  | | | |
| Age Range / Key Stage |  | | | |
| Other special interests |  | | | |

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c) Secondary Education

Name of School(s) and area

1.

2.

Qualifications gained

(Give subjects, grades, dates)

‘O’ Levels, GCSE (or equivalent)

‘A’ Levels (or equivalent)

**In-Service Training and Development**

Please give details of relevant courses and training undertaken in the last five years.

|  |  |  |  |
| --- | --- | --- | --- |
| Dates and duration | Title of Course / Training incl. Home Study & Distance Learning | Name of Provider e.g. LEA, College etc. | Qualification obtained (if any) |
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**Employment History**

Please give details of all jobs held after the age of 18, including part time and unpaid work, starting with your current or most recent employer. Please explain any gaps.

When giving details of school employment please include the age range, approximate school roll number and school type i.e. maintained, independent, foundation.

(Continue on a separate sheet if necessary giving page number and title heading)

Employer name and details:

Dates:

Full or Part Time:

Salary upon leaving (and TLR payments):

Reason for leaving:

Employer name and details:

Dates:

Full or Part Time:

Salary upon leaving (and TLR payments):

Reason for leaving:

Employer name and details:

Dates:

Full or Part Time:

Salary upon leaving (and TLR payments):

Reason for leaving:

## Other Skills and Interests

Please include languages (spoken / written), computers, etc. Please provide details of any community or voluntary work experience.

## Applicant Statement

In this section you are asked to outline how your knowledge, skills and experiences meet the competencies required for this post (where set out in the personal specification). Remember to consider experience in previous employment and relevant experience outside of paid work e.g. that gained at home, through the community or through leisure/college activities.

(Continue on a separate sheet if necessary giving page number and title heading)



Have you ever been convicted or cautioned of a criminal offence?

(If YES, please provide details of the Offence, the Sentence and the Date)

Yes

No



Are there any restrictions to your residence in the UK which might affect your right to take up employment in the UK?

(If YES, please provide details)

Yes

No



If you are successful in your application, would you require a work permit prior to taking up employment?

Yes

No

**Data Protection Statement**

I hereby give my consent for KCC or the school to which this application relates if not a KCC controlled school to process and retain on file information (including health and ethnic data) contained on this form and in accompanying documents. This is required for recruitment purposes, the payment of staff and the prevention and detection of fraud. This information may be shared with third party organisations including, but not exclusive to, payroll providers, the CRB, the police and other third parties as defined by the Data Protection Act 1998 and related legislation. All information will be dealt with in accordance with data protection legislation.

**Declaration**

I declare that the information I have given in this application is accurate and true. I understand that providing misleading or false information will disqualify me from appointment OR, if appointed, may result in my dismissal.

Signature Date

Please return your completed application form to: *(school add own address)*

# PART 3 : EQUAL OPPORTUNITIES MONITORING

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

**Hot Beans 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.**



**Ethnic Group** (These are approved by the commission for Racial Equality)

**White**

British Irish Any other White background\*

**Mixed**

White & Black Caribbean

White & Black African White & Asian Any other Mixed background\*

**Black or Black British**

Caribbean

African

Any other Black background\*

**Asian or Asian British**

Indian Pakistani

Bangladeshi

Any other Asian background\*

**Chinese or Other Ethnic Group**

Chinese

Other Ethnic Group\*

\*Please specify

**Gender**

Male

Female

**Date of Birth**

If you wish you may disclose information about yourself in this section about your:

Religion/Beliefs

Sexual Orientation

**Disability Statement**

**Hot Beans aims to be a fair employer and is committed to equal opportunity for disabled people. Applications from disabled people are welcome. If you are offered an interview, we have a policy of providing appropriate access and equipment to ensure that disabled people are considered on an equal basis. If you would like any further assistance or advice about this application we will try to help.**



Please answer the following questions:

1. Do you consider yourself to be disabled?

If YES, do you consider yourself to be disabled under the terms of the Disability Discrimination Act?

Yes

No

Yes

No

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

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

3. Do you wish us to try to arrange for any of the following to be available, if you are called for interview? Please tick.

Induction loop or other hearing enhancement Sign language interpreter (please state type) Keyboard for written tests

Someone with you at the interview (e.g. advocate or facilitator) Assistance in and out of vehicle

Accessible car parking Wheelchair access

Accessible toilet

Other assistance (please specify)

**The information you have given will be treated as confidential and is necessary to enable us to provide appropriate adjustments and facilities for your interview. Thank you for providing this information.**

**We reserve the right to verify the information supplied on this form.**