Southfields Academy

Application Form (Confidential)

Please refer to the guidance notes before completing this application form. Please use black ink or typescript.

We are an Equal Opportunity Employer and welcome applications regardless of race, colour, nationality, ethnic origin, sex, marital status, disability or age. All applicants are considered on the basis of their merits and abilities for the job. The Academy is committed to safeguarding and promoting the welfare of children.



Principal:
Ms Jacqueline Valin
Headteacher:
Ms Wanda Golinska
333 Merton Road
London
SW18 5JU
Tel: 020 8875 2600
Fax: 020 8874 9949
info@southfields wandsworth.sch.uk
www.southfields wandsworth.sch.uk

Position applied for	r:					
Closing Date:						
1. Personal detai	ls					
Surname/Family Na	ame:				Title:	
Forename(s):						
Previous names/su	rnames/	family na	mes:			
Address:						
Postcode:			Home telep	hone:		
Mobile telephone r	number:			Fax numb	oer:	
Email:						
Work telephone nu	ımber:					
May we call you at	work?	Yes	No			
National Insurance	Number:					
Please give dates/t	imes whe	en you wi	II NOT be ava	ailable for	interview	
e.g. holidays.						
Please give details	Please give details of any pension					
scheme to which yo	ou belong					

2. Employment history

Please list below all the jobs you have had in the past. Follow on from your answer to question 2 with the next most recent and include details of (a) voluntary work, (b) employment on a temporary contract or via an employment agency (including with the academy). You must account for all of your time since leaving school and give details of any gaps in employment below. Please continue on a separate sheet if necessary and attach to your form.

From:	
To:	
Position:	
Duties:	
Employer's name and address:	
Telephone number:	
Reason for leaving:	
Calamy (and Landing)	
Salary (on leaving):	
From:	
To:	
Position:	
Duties:	
Duties.	
Employer's name and address:	
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Telephone number:	
Reason for leaving:	
Salary (on leaving):	
From:	
То:	
Position:	
Duties:	
Employer's name and address:	
T.I. I	
Telephone number:	
Reason for leaving:	
Colomidan Israelia	
Salary (on leaving):	

Periods of Non-Employment
Please indicate nature/reasons for any periods of non-employment including relevant dates (DD/MM/YY)

3. Education, training and qualifications

Starting with the most recent please provide details and dates for all the educational establishments you have attended. Shortlisted applicants will be required to provide evidence i.e. original certificates, of **all** qualifications listed on the form. You are advised to list qualifications if (1) they are relevant to the job (2) listed in the person specification and/or (3) you can produce original copies of them. (*Please continue on a separate sheet if necessary and attach it to your form*). Candidates educated abroad must have their qualifications checked for equivalency by UKNARiC.

Name of School, College/University		Name of Course/Studies		en/ to be	Qualification level/ grade obtained	
4. Membership of p						
Please provide detai	ls of your DtCSF,	GTC, GSCC or of	ther relevant	membership	number.	
Name of body	Qualification of membership (class/grade)	Membership number	Date obtained	Gained by examination	Still current?	
				Y N	YN	
				Y N	Y N	
				Y N	Y N	
				Y N	Y N	
				Y N	Y N	
Please provide your teacher reference number if applying for a teaching post:						
Do you have Qualified Teacher Status to teach in England and Wales if applicable.					Y N	

I understand that I must provide original evidence of all qualifications listed above.

please cross

5. Further information on knowledge, skills, abilities and experience

Please use this space, with separate sheets attached if necessary to tell us how you meet the job requirements that are listed in the selection criteria/person specification. You must address ALL the items in the list. Do not attach a CV as it will not be considered. Please refer to the guidance notes on 'Applying for a Job'.

Please tell us why you are applying for this post and refer to experience and knowledge gained from previous employment, leisure interests and any other activities which are relevant to this position.

6. Referees

Please provide full details of two referees: one must be your present or most recent employer and the other should be a previous employer. If you have not been in paid employment please give the name of the head of education or training establishment that you attended and/or the manager of a voluntary group for whom you have worked.

Please note: The academy reserves the right to: (1) seek a reference from any previous employer/school/college or university and, (2) take up more than two references.

If you are shortlisted:					
May we contact your first i	w?	Yes	No 🗌		
May we contact your secon	view?	Yes	No 🗌		
Name of referen					
Name of referee:					
Job Title:					
Organisation:					
Address:					
Data of amployment/study	,	From:		To:	
Date of employment/study		FIOIII.		10.	
Relationship with referee e	e.g. iiile iiiaiiager.	Fax num	hori		
Telephone number: Email:		rax Hullii	ber.		
Elliali.					
Name of referee:					
Job Title:					
Organisation:					
Address:					
Date of employment/study	/ .	From:		To:	
Relationship with referee e	e.g. line manager:				
Telephone number:		Fax numl	ber:		
Email:					
Name of referee:					
Job Title:					
Organisation:				_	
Address:					
Date of employment/study					
Relationship with referee e.g. line manager:					
Telephone number:					
Email:					

7. Relationship						
Are you related to, or a close personal/business association with, any trustee OR any						
employee of the Academy?	Yes	No 🗌				
If YES please complete this sect	ion. You may attach an addition	nal sheet if necessary.				
Person's name:						
Position:						
Relationship:						
8. Employment Restrictions						
Are there any restrictions or co	nditions affecting your ability to	take up or remain in				
employment in the UK? E.g. do	you require a work permit? Are	you a highly skilled				
migrant or a working holidayma	ker? Yes	No				
If YES, please give details (include	ding, if you are already in the Uk	K, details of your current				
employer, visa/leave to remain	expiry date, certificate of spong	sorship number and tier				
under which you are employed						
If you are offered this job will y	ou have any other paid work?	Yes No				
16.77	1					
If YES, please give the following	details:					
Employer(S):						
Address:						
Telephone number:						
Date employed from: To:						
Number of hours per week: Working times/days:						
Are these arrangements subject	s subject to change e.g. shifts?	Yes No				
If YES please give details:						

9. Declaration

The Academy is committed to the safeguarding and promoting the welfare of children and vulnerable adults in its care, and to this end may use the information you have provided on this form to ensure the safeguarding and welfare of children and vulnerable adults. It may also share this information with other bodies responsible for safeguarding and promoting the welfare of children and vulnerable adults for these purposes.

The Academy is also under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

Providing any misleading or false information to support your application or canvassing Academy staff or governors directly or indirectly for an appointment will disqualify you from appointment, or if appointed will render you liable to dismissal without notice.

I hereby declare that I have understood and complied with the requirements laid down in the previous paragraphs.

DATA PROTECTION ACT 1998

I understand that the information given on this form will be used by the employer, Southfields Academy for:

- the purpose of processing my application for employment,
- monitoring the academy's employment policies; and if my application is successful,
- recording information relevant to my employment.

I understand that any information given relating to racial or ethnic origin, physical or mental health and criminal convictions constitutes sensitive data as defined by Section 2 of the Data Protection Act 1998. I hereby consent to the processing by the academy for the purposes set out above of all information given by me including such information as constitutes sensitive data.

Signea:	
Date:	

Please note: if you are completing this application electronically, you will be asked to sign the form if you are invited to an interview.

NOW YOU MUST COMPLETE THE RECRUITMENT MONITORING FORM!

Southfields Academy Equal Opportunities: Recruitment Monitoring Form (Confidential)

To make sure that recruitment and selection is being carried out fairly and to help check that the Academy's Equal opportunities in Employment policy is working, the Academy records the race, age and disability or people who apply for its jobs. The policy can be provided upon request.

You are asked to provide the following information. Thank you for your assistance.



Principal:
Ms Jacqueline Valin
Headteacher:
Ms Wanda Golinska
333 Merton Road
London
SW18 5JU
Tel: 020 8875 2600
Fax: 020 8874 9949
info@southfields.wandsworth.sch.uk
www.southfields.wandsworth.sch.uk

Position applied for:						
4.5						
1. Personal details						
Surname/Family Name:						
Forename(s):	_					
Gender:	Male	Female				
Please state how you found		•				
1. Publication (Please state v						
2. Internet (please state sear		•				
The date of birth question ha			nis form in light	t of the introduc	tion of the	
Employment Equality (Age) F	Regulat	ions.	T			
3. Date of Birth:						
Please read the following car	-	-	ig a cross in the	e appropriate bo	Х.	
I would describe myself as be White	eing the	e following:				
wille						
	Brit	ish			WBRI	
	Irisł	า			WIRI	
		•			•••	
	Trav	veller of Irish	Heritage		WIRT	
	Gypsy/Roma WROM					
Turkish WTUK						
	Wh	ite Eastern E	uropean		WEUR	
White Western European WWEU					WWEU	
	Wh	ite Other			WOWB	

Mixed		
	White and Black Caribbean	MWBC
	White and Black African	MWBA
	White and Asian	MWAS
	Any other mixed background	MOTH
Asian or Asian British		
	Indian	AIND
	Pakistani	APKN
	Bangladeshi	ABAN
	Any other Asian background	AOTH
Black or Black British		
	Caribbean	BCRB
	Ghanaian	BGHA
	Nigerian	BNGN
	Somali	BSOM
	Other Black African	вотн
	Any other black background	BAOF
Chinese		
	Chinese	CHNE
Any other ethnic background		
	Latin/ South/Central American	OLAM
	Any other ethnic background	ООТН

	I do not wish an ethni	background to	be recorded	REFU	
Disability					
The Academy is keen to encou	rage disabled peo	le to apply f	or jobs at the A	cademy.	
The following information is so	ought for two reas	ons:		-	
i) for monitoring purpo	ses; and				
ii) to determine any hel	p that you may red	uire at the i	nterview stage.	,	
a) Do you consider yoursel	f to have a disabili	ty which is d	efined in the Di	sability	
Discrimination Act 1995	as 'a physical or m	ental impair	ment which ha	s a	
substantial and long term	m adverse effect o	n ability to c	arry out norma	l day-to-day	
activities?		Yes No			
If Yes please indicate the nature of your disability:					
b) Is there anything we nee	d to know about y	our disabilit	y to offer you a	fair	
selection interview?		Yes No			
If Yes please give details:					

Information not obtained

NOBT

Rehabilitation of Offenders

Because of the nature of the work within Education, the post for which you are applying will be exempt from the provisions of the Rehabilitation of Offenders Act 1974. You will, therefore, be required to disclose on a separate form (An Enhanced Disclosure and Barring Service Check) all the information about any police cautions or convictions in a Court of Law no matter when they occurred, so that a police check can be carried out if you are offered an appointment. If you are subsequently employed by the Academy and it is found that you failed to disclose any previous convictions, this could result in DISMISSAL, or disciplinary action by the Academy. All information will be treated in confidence and will only be considered in relation to an application for posts to which the exemption order applies.

Please return this form completed together with your application form.