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| **PERSONAL DETAILS** | |
| Title: Choose an item. | |
| Surname: Click here to enter text. | |
| Forename(s): Click here to enter text. | Date of Birth:Click here to enter a date. |
| Other former names including Maiden Name:  Click here to enter text. | National Insurance number:(where applicable)  Click here to enter text. |
| DIES reference number (where applicable): Click here to enter text. | |
| Do you have Qualified Teacher status (QTS)? Choose an item. | |
| Are you registered with the General Teaching Council? Choose an item. | |
| Address: Click here to enter text.  Country: Click here to enter text. Postcode: Click here to enter text. | |
| Telephone Home: Click here to enter text. Work: Click here to enter text. Mobile: Click here to enter text. | |
| Email address: Click here to enter text. | |

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| Do you need a work permit? Choose an item. |
| Do you have permission / entitlement to work in the EU? Choose an item. |

**DETAILS OF POST APPLIED FOR**

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| **PRESENT or MOST RECENT EMPLOYMENT DETAILS** |
| Are you currently: Choose an item. |
| Name and address of current or most recent employer:  Click here to enter text. |
| Job Title: Click here to enter text. |
| Start date of current or most recent employment: Click here to enter a date. |
| Leaving date or notice required: Click here to enter text. |
| Reason for leaving current or most recent employment:Click here to enter text. |

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| Please give a brief description of your current or most recent duties / responsibilities or attach a copy of your Job Description. |
| Click here to enter text. |

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| **PREVIOUS EMPLOYMENT DETAILS** | | | | |
| Employer’s name & address | Job Title & brief details of age range/subjects taken | Dates Employed | | Reason for leaving |
| From | To |
| Click here to enter text. | Click here to enter text. | Click here to enter a date. | Click here to enter a date. | Click here to enter text. |
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| **EDUCATION AND OTHER TRAINING DETAILS** | | | |
| Please list all universities / colleges / schools attended together with details of other training you have undertaken relevant to the position you have applied for. | | | |
| Name of university / college / school | From | To | Qualifications / skills / training courses and results (where appropriate – see also below) |
| Click here to enter text. | Click here to enter a date. | Click here to enter a date. | Click here to enter text. |
| Click here to enter text. | Click here to enter a date. | Click here to enter a date. | Click here to enter text. |
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| **PROFESSIONAL / OTHER QUALIFICATIONS** | | |
| Qualifications obtained | Date | Awarding Body |
| Click here to enter text. | Click here to enter a date. | Click here to enter text. |
| Click here to enter text. | Click here to enter a date. | Click here to enter text. |
| Click here to enter text. | Click here to enter a date. | Click here to enter text. |

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| Please give details of membership of any professional body to which you belong:  Click here to enter text. |

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| **SKILLS, ABILITIES, KNOWLEDGE AND EXPERIENCE** |
| Please briefly describe how your skills, abilities, knowledge and experience match those set out in the job description. This should include any relevant experience gained whilst undertaking previous jobs and from “other than paid” work such as at home, in the community or through voluntary / leisure / college activities.  Click here to enter text. |

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| **REFEREES** |
| Please give the name, address and other contact details of two people who can provide a reference for you. One must be your current or most recent employer.  If you are an applicant who is not currently working with children but has done so in the past, one referee must be the employer by whom you were most recently employed in work with children.  References cannot be accepted from relatives or from people writing solely in the capacity of friends. “Open references” cannot be accepted. We reserve the right to take up further references from any other previous employer. |

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| **REFEREES** |
| Current / most recent employer  Name: Click here to enter text.  Address: Click here to enter text.  Telephone: Click here to enter text. Fax: Click here to enter text. Mobile: Click here to enter text.   Email address: Click here to enter text. |
| Other referee  Name: Click here to enter text.  Address: Click here to enter text.  Telephone: Click here to enter text. Fax: Click here to enter text. Mobile: Click here to enter text.   Email address: Click here to enter text. |

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| **SUMMATIVE DECLARATION** |
| I declare that to the best of my knowledge the information given in this form is true. |
| Signature: Date: |

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| **REHABILITATION OF OFFENDERS ACT 1974** |
| Disclosure of any criminal background is required. Offers of employment will also be dependent on completion of satisfactory police checks. Disclosure of a criminal background will not necessarily bar you from any appointment.  Have you ever been convicted of a criminal offence YES / NO  If YES:  Offence \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Sentence \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

St. George’s International School is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment. Please note that, where appropriate, the successful applicant will be required to provide a CRB Disclosure at the appropriate level for the post.

Please note that if you have not been contacted 3 weeks after the closing date, you have not been successful in your application on this occasion.

**Thank you for taking the time to complete this form.**