Please complete in black pen. Do not enclose a C.V. or additional documents as these will not be considered

All sections of the form must be completed. You may attach continuation sheets if necessary.

This form is available, on request, in large print, Braille, on tape or in electronic format

Post applied	for:			Ref num	nber:
				policy statement or before submitting	n the Recruitment of Ex your application:
I confirm I hav	e read th	ne <u>Recruitment</u>	of Ex Offende	ers policy statemer	nt 🗌
Persona	l Deta	ails			
Title		Surname			
Foren	ame			Forename 2	
Preferred n	ame			Previous names	
NI nur					
Address	Deta	ils			
House Nam	e/Numbe	er			
	Stree	et			
Area			To	wn/City	
County				Postcode	
	Countr	у			
Contact Details – our preferred method of contact is email. Please provide an email address an email address an email address an email address Email address				rovide an email address <u>and</u>	
Telephone number					

Employment history

- Please provide your full employment history starting with your present or most recent position.
- All periods of unemployment/gaps must be accounted for in the 'Gaps in Employment' section.
- If you do not have any previous employment history, please enter n/a.
- Use additional sheets to add further entries.

Current	or last job title					
Employ	ment start date]	Employment end	d date	
School/com	pany name and address					
If school (primary/	, type of School [secondary etc.)					
Local I	Education Author	ity				
Num	ber of pupils on r	oll				
,	Age range of pup	ils				
Job details (please provide a brief description of the role)						
Decem to						
Reason for leaving						
Salary on leaving						

Start date	Date of leaving	Name and address of employer. If a school please state: • LEA • No. of pupils on roll • Age range of pupils	Brief description of role	Reason for leaving	Salary on leaving

Employment history (contd)

Please use continuation sheet(s) if necessary.

Employment history gaps

including any travel abroad below. State the start and end date of the gap and details:						

Education and Qualifications

- Enter details from the most recent to the earliest.
- Include any professional qualifications in this section
- Qualifications will be verified on appointment.
 Please use continuation sheet(s) if necessary.

Place of learning and institution type	Subject	Qualification level (e.g.GCSE/A Level)	Grade	Date of attainment

Professional memberships

Please give details of any	v professional	I memberships that are	relevant to the	post applied for,	stating:

- professional body name
- your level of membership
- the date obtained and expiry or renewal date
 your membership or registration number

, , , , , , , , , , , , , , , , , , , ,						
Membership						
details						
Teaching information						
Please confirm your teacher reference number. This will be verified on appointment.						
Teacher registration number (Dfe number):						
If you gained qualified teacher status (QTS) after 1999 please state the date of successfucompleting the induction period or details of outstanding period if relevant. You will be as provide your QTS certificate on offer of appointment.						
Date:						
Professional Standing						
Teaching staff only: Do you hold a letter of professional standing for any countries where worked as a teacher? Yes \(\Boxed{D} \) No \(\Boxed{D} \)	Teaching staff only: Do you hold a letter of professional standing for any countries where you have worked as a teacher? Yes \(\square\$ No \(\square\$					
If yes, please provide the country and date of issue:						
Time spent abroad						
Do you hold a Certificate of Good Conduct for any time spent outside of the UK (for a pe months or more) in the last 5 years Yes \square No \square	riod of 3					
Training						
Please provide details of training and/or development courses you are undertaking or hacompleted. Please include the date attended and where applicable, if you passed or faile course.						

Sı	upporting Information
•	Please use the following section to address each point on the skills and knowledge section of
	the Job Description. You should provide information, examples and evidence to illustrate how
	you feel you meet the criteria for the job.
	The length of this statement should be no longer than one A4 page of text

The length of this statement should be no longer than one A4 page of text.	

References

- Please enter details of two referees who can provide a reference. One of the referees must be your present employer, or if you are not currently employed, your most recent employer.
- Referees should not be a relative and, ideally, should both be able to comment on your suitability for this post.
- As this position involves working with children any number of previous employers may be contacted, *without seeking further permission* from you, as part of the vetting process, in relation to your employment history. This includes vetting of internal candidates.

Reference	e 1 <i>(pr</i>	esent or mo	st recent employer)
Title		Surname	
For	ename		Reference Type Employment
Email a	ddress		
Tele	ephone		
Company	/ Name		
	sition in o		
Contact a	ddress		
Referenc	e 2		
Title		Su	rname
For	ename		Reference Type (delete as applicable) Employment/Character
Email a	ddress		
Tele	ephone		
Company	/ Name		
Position in company			
Contact a	nddress		

Declarations of criminal records, cautions and convictions

Posts involving work which brings you in regular contact with children, vulnerable adults, people with disabilities and learning difficulties are exempt from the provisions of the Rehabilitation of Offenders Act 1974 (ROA).

This means that you must disclose information about spent or unspent convictions or cautions when applying for this post, except where they are protected convictions and cautions as described in article 2A of the ROA Act 1974 (Exceptions) Order 1975. If you are shortlisted for this position, you will be asked to complete a self-declaration form of your criminal record and any information which may make you unsuitable to work with children.

CYC will check information relating to prospective employees through the Disclosure & Barring

Service (DBS). Having a crim	nal record will not necessarily prevent your employment.	
Investigations		_
investigated and proven to be	ct of any proven/unproven investigations (other than those that were unsubstantiated) in relation to your work with children or young peop capacity or carried out privately?	
Yes No If yes	olease give details	
Additional details		
a disability who meet the mini application form which demon	itive about Disabled People' scheme, an interview for all applicants version of the job. You must provide us with evidence in your strates that you generally meet the level of competence required for and knowledge section of the job description.	vith
Job share (Job sharing is dinformation)	ifferent to part time working – see the How to Apply guidance for furt	her
The City of York Council welc	omes individuals to apply on a job share basis (unless it has been that the role is unsuitable for job share). Please indicate below if you sis.	u
Are you applying for this pos	on a job share basis? Yes No	
Relationship with the co Are you related to any employ with any employee of City of Y Please give details	ee of City of York Coun <u>cil</u> or do you have any substantial connection	1

Applicant status For monitoring purposes please indicate if you work for Explore or Veritau you are not a	ou are already an employee of the City of York Council (If a CYC employee) Yes No
	be impossible for you to attend an interview. Whilst the ration, please note that it may not be possible to anging interviews.
Unavailable dates	
Eligibility to work in the UK Do you need permission to work in the UK? Yes No If your permission is limited, please provide f details of your immigration status, renewal day and any other relevant information.	
How did you hear about this job? Internal advertising City of York Council jobs website Jobs fair Universal Jobmatch/Job centre Word of mouth Community Care School website Other – please give details	LinkedIn Facebook Twitter National Apprentice Website NHS jobs Children's Social Work Matters School website

Declaration

I declare that the information given in this form and in any accompanying documentation is true to the best of my knowledge and belief and give my permission for enquiries to be made to confirm qualifications, experience, dates of employment, right to work in the UK, registrations and for the release by other people or organisations of necessary information to verify the content.

I understand my application may be rejected and/or I may be dismissed following appointment if I have given any false or misleading information or have withheld any relevant details.

any faise or misleading information or have withheld any relevant details.		
Signed		
-		
Print name		
Date		
nt		
neral Data Protection Regulations we are obliged to ask for your		

Consent

Under General Data Protection Regulations we are obliged to ask for your consent for us to contact you via the details you have supplied on your application form.

Please indicate if you are happy for us to contact you about your application, via the
details provided on your application form, for purposes of the Recruitment & Selection
process.
Yes No No

On occasions we may need to contact you for feedback regarding the Recruitment & Selection process. Please indicate if you are happy for us to do this.

Yes No

You have the right to withdraw your consent for us to process your data at any time.

Equal Opportunities Monitoring

The equal opportunities information provided will be treated in confidence and used only for monitoring purposes. It is not used as part of the selection process and the recruiting panel do not have access to any of this information.

Equal Opportunities Monitoring (confidential)

City of York Council is committed to equality and aims to ensure that everyone who works or applies to work for us is treated fairly and is not subjected to unlawful discrimination on grounds of their sex, age, race, ethnic or national origins, marriage or civil partnership, pregnancy and maternity, gender reassignment, sexual orientation, religion or belief, family responsibility, disability or political beliefs. Applications are welcome from all sections of the community.

Thank you for helping us to continue to improve our policies and practices.

Post applied for	Ref Number			
Sexual identification: Male Female U	nspecified			
Do you identify yourself as trans? Yes No Pre	efer not to say 🗌			
Date of Birth:	Nationality:			
Sexual orientation:				
☐ Heterosexual / Straight☐ Homosexual / Gay man☐ Not specified	☐ Lesbian / Gay woman☐ Bisexual☐ Prefer not to say			
Marital status				
☐ Married ☐ Partner ☐ Civil Partner ☐ Divorced ☐ Separated ☐ Widower	rtnership Single ed Prefer not to say			
Religion				
□ Baha'i □ Buddhist □ Christian □ Muslim □ Sikh □ No Religion	☐ Hindu ☐ Jain ☐ Jewish on ☐ Other ☐ Prefer not to say			
Ethnic Origin: Prefer to not say White: British Irish Other White background Mixed Race: White and Black Caribbean White and Black African White and Asian Other Mixed background Other Ethnic Groups:	Asian or Asian British: Indian Pakistani Bangladeshi Other Mixed background Black or Black British: Caribbean African Other Mixed background			
Any other background Chinese or other ethnic group Chinese				

Equal Opportunities Monitoring (contd)

Disability information

The Disability Discrimination Act 2010 states that someone is disabled if they have a 'physical or mental impairment, which has a sustainable and long term adverse effect on their ability to carry out normal day to day activities'. Please see 'How to apply' guidance for further information.

Do you consider yourself to be disabled?			
☐ Yes ☐ No Prefer to not say ☐			
If you tick "Yes" , please tick as many boxes below as apply:			
 □ Physical impairment (such as using a wheelchair to get around and / or difficulty using arms, legs etc) □ Sensory impairment (such as being blind / having a serious visual impairment or being deaf / having a serious hearing impairment) □ Mental health condition (such as depression or bipolar) □ Learning disability (such as Down's syndrome or dyslexia or cognitive impairment such as autism or one resulting from head-injury) □ Long-standing illness or health condition (such as cancer, HIV, diabetes, chronic heart disease, or epilepsy) □ Other please give details 			
Carer responsibilities			
City of York Council values and embraces all people, regardless of any caring responsibilities that they may have, and strives to ensure that all people are treated with dignity and respect. A carer is defined as someone who looks after family, partner or friends in need of help because they are ill, frail or have a disability and that the help they provide is unpaid (except for Carers Allowance).			
Are you a carer for family/friends? Yes No Prefer not to say			
If yes please tick the appropriate box:			
Carer for: Elderly relative Friend Relative Young relative (under 18yrs)			
Armed Forces Community To enable us to monitor applications from the Armed Forces community please indicate if you are part of this. Are you a member of the armed forces community?			
Yes No Prefer not to say If yes please tick the appropriate box:			
☐ Reservist ☐ Regular personnel ☐ Veteran ☐ Family of regular personnel, reservists or veterans ☐ Bereaved			