Victo	ria Applic	cation For	m -	- Nc	on-	Геас	:hi	ng		
Academies	IRUST	you need a copy o ille, another langu	•••••				• • •	,		
Application for the post of:		Aca	Idemy	:						
Personal Information			Pre	evious r	name((s): (if a	oplic	able)		
Last name:								· ·		
First name(s):										
Home address:										
Please specify alternative correspondence address on a separate sheet.		Postcode:								
E-mail address:										
National Insurance No:										
Date of birth:										
Do you have a full current driving licence?	Yes 🗌 No 🗌	Home telepho numb								
Do you have daily use of a vehicle?	Yes 🗌 No 🗌	Work telepho numb								
Do you have any penalty points on your licence?	Yes 🗌 No 🗌	Mobile telepho numb								
If so, how many?										
Do you consider yourself to	have a disability?					Ye	es		No	
(NB: The Disability Discrimi impairment which has a sub activities")										
The Academy operates an ' criteria of the post.	Interview Guarantee S	cheme' for people	with	a disa	bility	and wh	o me	eet th	e esse	ntial
If you have a disability, are if you are called for intervie		s which we can ma	ke for	you		Ye	es		No	
If yes, please outline your re										
How did you find out about	this job?									
Are you applying on a job sl	hare basis?	Yes 🗌 No	D							
If so, please state the propo	ortion of full-time you a	re willing to work:								

Present (or Most Reco	ent) Employment			
Employer's name, address and telephone no:				
Date started:		Title of Post:		
	- /			
Present or final grad Specify any addition				
Notice required:		Date of leaving	(if applicable):	
Reason for leaving (i	if applicable):			
Please provide a brie	of description of dut	ies of the post (contin	ue on a separate sh	eet if necessary):
Have you ever been	subject to disciplina	ary proceedings?	Yes 🗌 No	
If yes, please indicat	e the outcome:		_	

Previous employment

Beginning with the most recent, all periods since leaving full-time education should be accounted for e.g. unemployment, voluntary work, raising a family or any part-time work undertaken whilst in education. (Continue on a separate sheet if necessary).

Job title	Employer's name, address & telephone no	Date from	Date to	Salary	Duties and achievements	Reason for leaving

CONTINUE ON A SEPARATE SHEET IF NECESSARY.

Education/training

School/College/University /Training Provider	Dates attended	Subject(s) or course/training event title (including exams passed/still to be taken and grades where applicable).	Office use only. Certificates checked

CONTINUE ON A SEPARATE SHEET IF NECESSARY.

Professional qualifications

Name of professional association	Professional qualifications/ Membership and date Obtained	By award or examination	Office use only. Certificates checked
CONTINUE ON A SEPARATE SHEET IF N	IECESSARY.		

Additional information

Please give any details you wish in support of your application, in particular any experience, skills, knowledge, training and qualifications relevant to the post applied for as detailed in the information sent to you. (Please continue on a separate sheet if necessary).

References One should relate, if applicable to your present job, or most recent employer, or a member of the School/University Academic Staff. Please state in what capacity the two referees are acting, e.g. current employer. Please include name, address, telephone number and e-mail address if known. If you have recently left full-time education, please ensure you include a Head Teacher/College/University Principal (or their rep) as one of your references. 1st referee's name and address: Telephone no: Capacity: E-mail address: 2nd referee's name and address: Telephone no: Capacity: E-mail address: Please note that should you be made a conditional offer of employment with the Academy Trust, references will be sought as part of the pre-employment process. Asylum and Immigration Act 1996 All short listed applicants will be required to provide original material evidence of their Eligibility to Work in the UK. With reference to the accompanying Guidance Notes please confirm that you are able to provide the appropriate documents. Yes No No Rehabilitation of Offenders Act 1974 This post is exempt from the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended). All criminal convictions, cautions and bind overs must be declared regardless of when they occurred. This information will be treated in confidence. Do you have a prosecution pending or have you ever been convicted at a court or cautioned by the Police for any offence? No No Yes If yes, please give date(s) of conviction/caution(s) and brief details: The Academy aims to promote equality of opportunity for all with the right mix of talent, skills, and potential and we welcome applications from diverse candidates. Criminal convictions, cautions and bind-overs will be taken into account for recruitment purposes only when relevant.

For Posts working with Children or Vulnerable Adults
The Academy is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults and expects all staff and volunteers to share this commitment.
Please refer to the accompanying Guidance Notes for further information relating to this process.
Declarations To your knowledge are you related to any member of staff of Governor of the Academy?
Yes 🗌 No 🗌
If 'Yes', please state their name and position held:
The information given in this form will form part of The Contract of Employment for successful candidates. Under the terms of The Data Protection Act 1998 the information you give us will be kept confidential and will only be used for the purpose of personnel management. We may contact other relevant organisations to check factual information, including sickness absence, you have given details of in this application form. The information will be stored manually and / or electronically and if unsuccessful your application will be disposed of after 6 months.
I declare that all the information I have provided is true, that I have not canvassed a member/officer of the Academy, directly or indirectly, in connection with this application and further, that I will not do so. I understand that such canvassing will disqualify me as a candidate. I further understand that failure to disclose any relationship with a member/officer of the Academy or providing information which is untrue or omitting information relevant to the application, will also disqualify me and that if such failure/untrue information is discovered after appointment I may be liable to dismissal without notice. I agree that the information I give you in connection with this application for employment may be stored and processed for the purpose of personnel management.
Name:
Signed:
Date:
Please remember to complete and return the recruitment monitoring form.
We ABOUT STATE