# Job Application – CRB Post Schools



Please read the Guidance for Applicants before completing this form. All sections must be completed using black ink or type. Your application will be considered only if you complete all the relevant sections of this form. If you need more space please attach a separate sheet(s). Please write the job reference and job title on each additional sheet.

#### **EQUAL OPPORTUNITIES STATEMENT**

Middlesbrough Council will afford equal opportunity in all aspects of employment, irrespective of disability, gender, race, religion or belief, age, sexual orientation, marital or civil partnership status.

#### **DECLARATION**

By submitting this application I am agreeing that the information given is true and correct and I understand that any offer of employment will be made on this basis. I understand that trying to influence Elected Members, employees, or Heads/Governors of educational establishments, in connection with this application, will disqualify me. I understand that in line with legislation, if the job for which I am applying will have access to children or vulnerable adults or is a designated job within the meaning of Criminal Records Bureau (CRB) legislation, I agree to being checked by the CRB to disclose any criminal record I have. I understand that in line with legislation I will be required to provide evidence of my eligibility to work in the UK.

JOB TITLE:			REF NO:
DEPARTMENT/SERVICE:			
PERSONAL (please complete in Bl	LOCK CAPITALS	5)	
Title: Surn	ame/Family Nam	ne:	
Please give any previous names (in	ncluding surname	es) by which you have	oeen known:
First Name:		Middle Name(s):	
Address:			
		Po	stcode:
Telephone (Daytime):			
May we contact you at work? Ye	es 🗌 No 🗌	Email address:	
Please tick this box to confirm you a	are happy for us	to communicate with y	ou using this email address:
If not, please provide an alternative	email address:		
National Insurance Number:			
Do you want to work full-time only?			Yes 🗌 No 🗌
Would you like us to consider you fo job/share/part-time, working in term	•	•	Yes 🗌 No 🗌
If yes, please specify:			

#### **CURRENT OR LAST EMPLOYER**

If you are applying for this job with no previous experience, please put 'N/A' in this part of the application form.

Employer's Name:		Job Title:	
Address:			
Postcode:	Date Appointed:	Salary:	
Notice Period:	Date Left:	Reason for Leaving:	
Brief description of duties and re	sponsibilities:		

**CAREER HISTORY** – Please account for any gaps in employment, training or education date

EMPLOYMENT - If you are applying for this job with no previous experience, please put 'N/A' in this part of the application form.

Name and address of						
employer(s) (Show latest employment first)	description of duties	From	То	Reason for leaving		

EDUCATION						
Diago you studied at		tes	Qualification/Qubicat	Lovel	Grade	Date
Place you studied at	From	To	Qualification/Subject	Level	Grade	achieved

Place you studied at	Da	100	Qualification/Subject Level Grade		Date	
Flace you studied at	From	To	Qualification/Subject	LOVOI	Grade	achieved

#### HIGHER EDUCATION

Place you studied at		tes	Qualification/Subject	Level	Grade	Date
1 lace you studied at	From	То	Qualification/Subject	Levei	Orace	achieved

#### MEMBERSHIP OF PROFESSIONAL ORGANISATIONS

Please list any professional organisations of which you are a member which are relevant to the job for which you are applying.

Professional Organisation	Subject/Level of Membership

If you are applying for a teaching job, please confirm you are qualified to teach in England and Wales and that you are registered to do so. Please tell us your Teacher Registration Number. If you are applying for a job as a Social Worker, please tell us your General Social Care Council Reference Number.

Teacher Registration Number:	General Social Care Council Reference Number:

## CONTINUING PROFESSIONAL DEVELOPMENT AND OTHER TRAINING COURSES

Please give details of how you have kept your skills up-to-date and any other courses/qualifications or continuing professional development undertaken relevant to the role for which you are applying.
<b>SKILLS, KNOWLEDGE AND EXPERIENCE</b> Using the person specification as a guide, please tell us how you feel your skills, knowledge and experience are relevant to this job. Remember to include any experience you have gained in community or voluntary work as well as employment. Please continue on a separate sheet if necessary.
It is important to complete this section. Simply referring to a curriculum vitae is not acceptable.

## **OTHER DETAILS**

The Council has a policy of guaranteeing interviews for people with disabilities who criteria in the person specification for the job.	meet all the essential
Under the Equality Act 2010 a person is disabled if they have a physical or mental is a substantial and long-term adverse effect on their ability to carry out normal day-to-day	
Do you consider yourself to have a disability under the Equality Act 2010 and wish to claim this guaranteed interview?	Yes 🗌 No 🗌
Do you require any reasonable adjustments to help you demonstrate your full poten process? If so, please give details:	tial in the recruitment
Do you have a relationship with a Councillor or Senior Officer (or, if you are applying to a school, any school governor) within this Authority?	Yes  No
NOTE: Please note canvassing of Members and Officers of the Council directly or indirectly application will disqualify you.	ectly in connection with
If YES, please state the person's name, position/job title and relationship:	
Do you hold a UK Driving Licence? Yes / No If Yes, please specify the type (Full,	HGV, etc):
As part of the recruitment process you will be required to provide evidence of your eligib	ility to work in the UK:
Are you eligible to work in the UK?	Yes  No
Do you receive an occupational pension from the Local Government Pension Scheme?	Yes  No

#### **REFERENCES**

Signed:

Please provide two references, one of which should be from your present or most recent employer. As this post requires a CRB disclosure **we will take up these references before we interview you.** If you do not provide full contact details, including contact telephone numbers, for your referees, this may delay the recruitment/appointment process. If you have not worked previously, please name someone as a referee who has known you for at least three years but is not a relative.

Reference 1:				
Name:	Job Title:			
Organisation:				
Address:				
	Postcode:			
Email:	Telephone:	Fax:		
Relationship to you:				
Reference 2:				
Name:	Job Title:			
Organisation:				
	Postcode:			
	Telephone:			
Relationship to you:				
Data Protection Statement:  The information you give on this form and the equal opportunities monitoring form will be used for recruitment monitoring purposes. If you are appointed to the job your name and address will be given to the recognised trade unions, who may contact you with membership information. Please tick the box if you do not want your information to be passed to the trade unions.				
	omplete the section:- Rehabilitation e completed all other relevant sect	*		
By submitting this application I am that any offer of employment will be	agreeing that the information given is made on this basis.	s true and correct and I understand		

Please return the application form as instructed in the details of the advert for the job or to the address supplied with the application information.

Date:



## **REHABILITATION OF OFFENDERS ACT - DISCLOSURE OF PREVIOUS CONVICTIONS**

Before completing this section please read the Guidance for Applicants which includes information on the Rehabilitation of Offenders Act and the Council's Safeguarding and CRB Policy.

•					
As an Equal Opportunities employer Middlesbrough Council will not unfairly discriminate against you if you declare that you have a criminal record. Criminal records are only taken into account when the conviction may be relevant to the job for which you are applying.					
This post is exempt from the Rehabilitation of Offende cautions or final warnings you may have in the Convict be 'spent' under this Act.					
We will keep in strict confidence any information we re it securely during the recruitment and selection process		al Records Bureau. We will store			
A criminal record will not necessarily affect your chappointment. In making this decision we will consider you were when you committed the offence, and Safeguarding and CRB policy and procedures.	the nature of the offe	ence, how long ago and what age			
Do you have any <b>unspent</b> convictions?		Yes ☐ No ☐			
If <b>YES</b> , please give the details of the offence, date of conformation in the section below.	onviction, judgement/	sentence and any other additional			
DISCLOSURE OF PREVIOUS CONVICTIONS					
Before completing this section please read the Guida Rehabilitation of Offenders Act and the Council's Safeç					
Details of Offence	Date of Conviction	Sentence/Judgement			
Additional Information					
<b>Important:</b> This page should be detached from yo marked 'Private and Confidential' and 'For the attention	• •	·			
Name: (please print):	Refer	ence No (for internal use only)			
Sign:					
Date:		<del></del>			