

## Job Application Form – Ripley Endowed CE Primary School and Pre-School

Completed applications should be returned to the school at the following address:

**Ripley Endowed CE Primary School, Main Street, Ripley, Harrogate, HG3 3AY**

Applications can also be returned by e-mail to:

[admin@ripley.n-yorks.sch.uk](mailto:admin@ripley.n-yorks.sch.uk)

### SECTION 1 - POST DETAILS

Reference Number:

Job Title: **GTA**

Closing Date: **15<sup>th</sup> November 2021**

**Please write in capital letters in black ink or type, do not include a CV.**

**This application form has been designed to exclude information that might lead to discrimination. Please refer to the accompanying guidance notes when completing your application.**

### SECTION 2 - PERSONAL DETAILS

Title:	First forename:
Other forename:	Surname:
Former Surname:	Other names:
Address line 1:	Address line 2:
Town:	County:
Postcode:	Country:
Home Phone No.:	Resident at this address since (Date):
Mobile Number:	Work Number:
Email Address:	

**Please note correspondence regarding your application may be sent to your e-mail and/or postal address. Applicants who have not heard within 21 days of the closing date are thanked for their application and are asked to assume that it has been unsuccessful on this occasion.**



**SECTION 6 – FURTHER EDUCATION**

Detail here any Further Education/Vocational/Professional Qualifications/Other Qualifications held or currently being studied (continue on a separate sheet if necessary).

School, College or University	Subject	Qualification/Level	Grade	Year Obtained / Examination Date

**SECTION 7 – COURSES**

Please give details of recent significant in-service training courses etc. attended. (Continue on a separate sheet if necessary). (*Teaching Roles Only - Newly Qualified Teachers are invited to outline key elements of their course*).

Organising Body	Nature/Title of Course	Dates

**SECTION 8 – MEMBERSHIP OF PROFESSIONAL BODIES**

Institute	Grade of Membership, Membership Number	Enrolment date	Examination date	Expiry date

**SECTION 9 – REGISTERED COUNCILS**

Are you registered with the Institute for Learning? Yes  No

If you have answered Yes, please provide your Registration number

**Teaching Roles only:**

Teacher Reference Number:			
Current salary point:			
Date QTS awarded:			
Induction period completed?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Date of completion:	
If you have answered No, please select the appropriate option:	Not yet started <input type="checkbox"/> Term 1 completed <input type="checkbox"/> Term 2 completed <input type="checkbox"/> Exempt <input type="checkbox"/>		

**SECTION 10 – EMPLOYMENT DETAILS**

Have you previously worked for or are currently working for North Yorkshire County Council? (*An employee is defined as someone who is paid directly by NYCC and does not include those working in a voluntary capacity or via an agency*)

Yes  No

Manager's name and job title:	Job Title:
Place of work:	Employment start date (Month/YYYY):
Employment end date (Month/YYYY) (if applicable):	Reason for leaving (if applicable):
Number on roll ( <i>teaching roles only</i> ):	Age Range ( <i>teaching roles only</i> ):
Employee reference number:	

**SECTION 11 – PRESENT OR MOST RECENT EMPLOYMENT**

Name of Employer:	
Local Education Authority:	
Address line 1:	Address line 2:
Town:	County:
Postcode:	Country:
Post held:	Grade:
Number on roll ( <i>teaching roles only</i> ):	Age Range ( <i>teaching roles only</i> ):
Date of appointment (Month/YYYY):	Salary:
Notice Required:                      Weeks/Months	Telephone number:
Leave date (if applicable- Month/YYYY):	Reason for leaving (if applicable):
Summary of current job role; duties and responsibilities	

**SECTION 12 – PREVIOUS EMPLOYMENT**

List all your previous jobs (most recent first). Identify and account for any gaps in employment.

<b>Name of Employer:</b>	
Address line 1:	Address line 2:
Town:	County:
Postcode:	Country:
Post held:	
Job Role Summary:	
Grade / Salary:	Date from (Month/YYYY):
Date to (Month/YYYY):	Reason for leaving (if applicable):
<b>Name of Employer:</b>	
Address line 1:	Address line 2:
Town:	County:
Postcode:	Country:
Post held:	
Job Role Summary:	
Grade / Salary:	Date from (Month/YYYY):
Date to (Month/YYYY):	Reason of leaving (if applicable):
<b>Name of Employer:</b>	
Address line 1:	Address line 2:
Town:	County:
Postcode:	Country:
Post held:	
Job Role Summary:	
Grade / Salary:	Date from (Month/YYYY):
Date to (Month/YYYY):	Reason of leaving (if applicable):
<b>Name of Employer:</b>	
Address line 1:	Address line 2:

Town:	County:
Postcode:	Country:
Post held:	
Job Role Summary:	
Grade / Salary:	Date from (Month/YYYY):
Date to (Month/YYYY):	Reason of leaving (if applicable):
<p><b>Please provide details for any gaps in your employment history when you have not been in education, training or employment.</b>  <b>Please list dates and the reason (i.e. travel, parental leave, etc.)</b></p>	
Gaps in employment (including dates (Month/YYYY))	

### SECTION 13 – REFERENCE OF PRESENT OR MOST RECENT EMPLOYMENT

Please give the name and addresses of two referees (not relatives) one of whom should be your present employer (or last employer if not currently employed). If you are in, or have just completed, full time education, one referee should be from your College/University.

Title:	First forename:
Other forename:	Surname:
Address line 1:	Address line 2:
Town:	County:
Postcode:	Country:
Telephone number:	Email address:
Occupation:	
Relationship to you?	<p>Do you give permission for referees to be contacted prior to an offer of employment being made?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>

**Please note your referee should ideally be a previous line manager or someone in a position of authority.**

### SECTION 14 – REFERENCES

Title:	First forename:
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Other forename:	Surname:
Address line 1:	Address line 2:
Town:	County:
Postcode:	Country:
Telephone number:	Email address:
Occupation:	
Relationship to you?	Do you give permission for referees to be contacted prior to an offer of employment being made?  Yes <input type="checkbox"/> No <input type="checkbox"/>

## SECTION 15 – DECLARATIONS AND CONSENTS

Are there any reasonable adjustments that you would require to enable you to participate in the interview/assessment event if you were selected to attend?	
Are you related to any member or employee of the County Council?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If you answered 'Yes', please provide details	
Are you related to a member of the School Governing Body?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'Yes', please provide name(s) & relationship:	
I understand that canvassing of any Governors, Members or Officers of North Yorkshire County Council in connection with this appointment will disqualify me.	Yes <input type="checkbox"/> No <input type="checkbox"/>

**Has any previous employer expressed concerns and/or taken any action, whether informal/formal (including suspension from duty) on the following: (Include any investigations or actions taken by your professional body)**

<b>Capability or work performance</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please provide details:	

<b>Disciplinary</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please provide details:	
You are only required to declare live disciplinary sanctions unless they relate to safeguarding (see below)	
<b>Safeguarding</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please include details of any allegations which have been made against you and how these have been categorised. Any disciplinary sanctions relating to safeguarding must also be declared, including those which have expired for disciplinary purposes.	
Are there any dates when you would not be available for interview in the near future?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please provide details:	
Please state the date on which you could take up duty if appointed	
Do you hold a current driving licence?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Driving licence number	
Driving licence type	Paper <input type="checkbox"/> Photo <input type="checkbox"/>
Date valid from (DD/MM/YY)	
Issue Country	
What type of licence is it? (eg full, provisional, HGV, PSV)	
Do you have use of a car?	Yes <input type="checkbox"/> No <input type="checkbox"/>
I declare that the information contained in this application form is correct and understand that the school/Council will request to see proof of qualifications at the time of interview.	Yes <input type="checkbox"/> No <input type="checkbox"/>
I consent to the school and North Yorkshire County Council recording and processing the information detailed in this application. North Yorkshire County Council will comply with their obligation under the Data Protection Act 2018.	Yes <input type="checkbox"/> No <input type="checkbox"/>



**SECTION 16 – SUPPORTING EVIDENCE**

Please ensure that you have read carefully the job description and person specification for the role that you are applying for. In this section you are required to detail how your knowledge, skills and experience evidence that you meet the requirements for this post as detailed in the person specification and advertisement. Shortlisting and appointment to this post will be based on your ability to meet these requirements.

If you submit this form via email you are declaring that the information stated is true and accurate.

I confirm that the information that I have provided in support of this application is complete and true and understand that knowingly to make a false statement for this purpose will be judged as serious misconduct, which may result in dismissal, or may be a criminal offence.

Signature: .....Dated:.....

Please return all completed applications to the school address

**SECTION 17 – EQUAL OPPORTUNITIES MONITORING**

North Yorkshire County Council is committed to equality in employment. The Council's aim is to ensure equality for all existing and prospective employees. In line with this North Yorkshire County Council are required to publish work force data.

In order to assist the Council with this aim please provide the information below in monitoring recruitment procedures for which your co-operation would be appreciated.

The information will not form part of our short listing, and will be separated from your application form upon receipt. The information provided will be used for statistical and monitoring purposes and to help us to develop our policies and practice and will be treated confidentially and be subject to the provisions under the current Equality Legislation and Data Protection Act.

Applicant name	
Post applied for	
Closing date	
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/> Prefer not to disclose <input type="checkbox"/>
<b>Please note: the categories below are taken from the 2001 Census. The Council is required to use this format for its monitoring exercises.</b>	
What is your ethnic group?	White British <input type="checkbox"/> White Irish <input type="checkbox"/> White Other <input type="checkbox"/> Mixed: White and Black <input type="checkbox"/> Mixed: White and Black African <input type="checkbox"/> Mixed: White and Asian <input type="checkbox"/> Asian or Asian British <input type="checkbox"/> Asian or Asian British: Indian <input type="checkbox"/> Asian or Asian British: Pakistani <input type="checkbox"/> Asian or Asian British: Bangladeshi <input type="checkbox"/> Asian or Asian British: Other Asian <input type="checkbox"/> Black or Black British: Caribbean <input type="checkbox"/> Black or Black British: African <input type="checkbox"/> Black or Black British: Other Black <input type="checkbox"/> Chinese or Other Ethnic Group <input type="checkbox"/> Other <input type="checkbox"/>
Please specify	
Do you consider yourself to have a disability as described by the Equality Act 2010?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Date of birth*	

\* For successful candidates only, this information will be used as part of pre-employment vetting checks to assist in the confirmation of identify.