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| **PERSONAL DETAILS** | | | | | | | | | | | | | | | | | | | Application No. | | | | | | | | | | | **(For College Use Only)** | | | | | | | | | | | | | | |
| This sheet will be separated from your application and will not form part of the selection process. **Please complete this form in black ink or typescript.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Post Title: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Surname: | | | |  | | | | | | | | | | | | | | | | | | Title: Mr, Mrs, Miss, Ms, Other (please state): | | | | | | | | | | | | | | | | | | | |  | | |
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| First Names: | | | | |  | | | | | | | | | | | | | | | | | Any Previous Surnames: | | | | | | | | | | | | | | |  | | | | | | | |
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| Address: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Telephone Home: | | | | | | |  | | | | | | | | | | | | | | | Work: | | | | | |  | | | | | | | | | | | | | | | | |
| Mobile: | | | |  | | | | | | | | | | | | | | | | | | Email Address: | | | | | | | | | | |  | | | | | | | | | | | |
| National Insurance No: | | | | | | | |  | | | | | | | | | | | | | | Teacher Reference Number (TRN) if held: | | | | | | | | | | | | | | | | | |  | | | | |
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| Can you be contacted  at work: | | | | | | | | | Yes | |  | | No | | |  | | Are you: | | | | | | Male | | |  | | | | Female | | | |  | | | Date of Birth: | | |  | | | | |
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| Do you have any special requirements in terms of religious belief: | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
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| Do you consider yourself to have a disability? | | | | | | | | | | | | | | | | | Yes | | |  | | | No | | | | | |  | | | |  | | | | | | | | | | |
| This question is asked to ensure that individuals with disabilities receive the opportunity of an interview if they meet the key requirements for the post. If you have answered yes to the above question, could you please give details below including any practical steps which we should take into account when arranging an interview. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Please tick what you consider to be your ethnic origin. This information will be used to assess the response to the advertisement and to monitor the College’s Equal Opportunities Policy. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | White |  | | | | Pakistani | | | | | |  | | Black Caribbean | | | | | | |  | | | | | Bangladeshi | | | | | | | |  | | Black African | | | | | |  | Chinese | | | |
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|  | Black  Other |  | | | | Other | | | | | |  | | Indian | | | | | | |  | | | | | Other Asian | | | | | | | |  | | Not Known | | | | | |  |  | | | |
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| Please state your nationality: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **APPLICATION FOR EMPLOYMENT** | | | | | | | |
|  | | | | | | | |
|  |  | | | | Application No. **(For College Use Only)** | | |
| **Please complete this form in black ink or typescript**. For multiple applications please indicate which posts you wish to be considered for: | | | | | | | |
| **Application for the post of:** | |  | | | | | |
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| 1. **Education and Qualifications**  Include in this section all relevant qualifications, i.e. secondary, further, higher and professional. Indicate subjects currently being studied for with an asterisk (\*). | | | | | | | |
| Subject/Qualification & Awarding Body | | | Place of Study | | | Grade/Results | Month/Year Obtained |
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| 2. **Membership of Professional Bodies** | | | | | | | |
| Name of Institute/Professional Body | | | | Membership Status | | Registration Number and Renewal Date | |
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| 3. **Current / Most Recent Employment** Please give details of your current position / most recent employment. | | | | | | | | | |
| Month & Year From - To | Name of employer and nature of business | | Position and main duties | Reason for leaving | | Present/Last Salary | | Is/was the post | |
|  |  | |  |  | |  | |  | |
| From  To |  | |  |  | |  | | Full time |  |
|  |  |
| Par time |  |
| Weekly Hours | |
|  |  | |  |  | |  | |  | |
| 4. **Previous Employment** Please give details of all previous positions (most recent first) held since completing full-time education. Please also explain any gaps in employment (continue on a separate sheet if necessary). Please note the College reserves the right to contact each previous employer for verification of details provided. | | | | | | | | | |
| Month & Year  From - To | Name, address, contact telephone number and nature of business | Position and main duties | | | Reason for leaving (if applicable) | | For Office Use  Discussed at interview (initial and date) | | |
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| 5. **Abilities, Skills, Knowledge, Experience and Additional Information** | | | | | | | | | | | | | | | | | | | |
| Please state how you meet the person specification for this role. Please give details of anything relevant such as abilities, skills, knowledge and experience. Please give examples of how you have demonstrated any relevant skills, abilities and behaviours. These may have been gained through paid employment, voluntary or community work, domestic responsibilities, spare time activities and training. Include your reasons for applying for this post, and any additional information in support of your application. If necessary please continue on a separate sheet. | | | | | | | | | | | | | | | | | | | |
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| 6. **General Information** | | | | | | | | | | | | | | | | | | | |
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| What category of Driving Licence do you hold | None | | |  | | Motorcycle | | |  | | Car | |  | | HGV |  | PCV | |  |
|  | | | | | | | | | | | | | | | | | | | |
|  | Other | |  | | | | | | | | | | | | | | | (Specify) | |
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| If appointed, when can you be available for employment? | | | | |  | | | | | | | | | | | | | | |
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| Do you wish to be considered for the post on a job share basis? | | | | | | | Yes |  | | No | |  | |  | | | | | |
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| 7. **Data Protection** | | | | | | | | | | | | | | | | | | | |
| The information provided on this form will be used in the recruitment process and may form the basis of some personnel records for the successful candidate. Information is processed and stored within the provisions of Data Protection Act 1998.  Should you be unsuccessful in the selection process, the records will be kept for up to 12 months and then destroyed. | | | | | | | | | | | | | | | | | | | |
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| 8. **Notes** | | | | | | | | | | | | | | | | | | | |
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| **Bishop Burton College • Bishop Burton • Beverley • East Yorkshire HU17 8QG**  **Telephone: +44 (0) 1964 553000 • Fax: +44 (0) 1964 553101 •** [**enquiries@bishopburton.ac.uk**](mailto:enquiries@bishopburton.ac.uk) **• www.bishopburton.ac.uk** | | | | | | | | | | | | | | | | | | | |
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| Will you require a work permit for this post? | | Yes | | | | | |  | | No | |  | |  | | | | | |
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| Relationship to Members of the Corporation or anyone employed by the College. Enter NONE if no relationship exists: | | | | | | | | | | | | | | | | | | | |
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| **Safeguarding, DBS Checks, Regulated Activity, and Rehabilitation of Offenders**  You are asked to read the following statement carefully. | | | | | | | | | | | | | | | | | | | |
| If you are shortlisted for this role you will be asked to declare all convictions. If you are offered the post this will be subject to a satisfactory DBS check. All convictions will be included on your DBS certificate. They will not be “filtered”.Certain criminal convictions may affect your eligibility for employment with the College.  **The duties of this role involved engaging in “regulated activity”** **which means it is an offence to apply for the role if the applicant is barred from engaging in regulated activity relevant to children.**  Because of the nature of the work for which you are applying, this post is exempt from the provisions of Section 4 (2) of the Rehabilitation of Offenders Act 1974, by virtue of the Rehabilitation of Offenders Act (Exemptions) Order 1975 as amended. Applicants are, therefore, **NOT ENTITLED** to withhold information about convictions, cautions or final warnings which for other purposes are “spent” under this Act. Any information given will be completely confidential and will be considered only in relation to an application for positions to which the Order applies.  I have read the above statement and understand it. | | | | | | | | | | | | | | | | | | | |
| Signed:(Applicant)  Date: | | | | | | | | | | | | | | | | | | | |

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| **References**  Please give the names and addresses of two referees who have consented to provide a reference on your behalf. One should be your current employer or, if unemployed, your most recent past employer. If you have not previously been employed please indicate other suitable referees.  One of your references should be the relevant employer from the last time you worked with children.  If your reference is from a school or college, this should be from the Headteacher or Principal.  Family members or people writing solely in the capacity of friends or colleagues are not acceptable as referees. Referees will normally be contacted before interview (unless otherwise stated).  Referees are asked about any disciplinary offences relating to children, including any in which the penalty time expired and whether the applicant has been the subject of child protection concerns.  **Reference 1 Reference 2** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name: |  | | | | | | | | | | | |  | Name: | |  | | | | | | | | | |
| Address: | |  | | | | | | | | | | |  | Address: | | |  | | | | | | | | |
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|  | | | | | | Postcode: | | | |  | | |  |  | | | | | | Postcode: | | |  | | |
| Email Address: | | | |  | | | | | | | | |  | Email Address: | | | | |  | | | | | | |
| Telephone No: | | | |  | | | | | | | | |  | Telephone No: | | | | |  | | | | | | |
|  | | | | | | | | | | | | |  |  | | | | | | | | | | | |
| Can be contacted before interview: YES | | | | | | |  | NO | | |  |  |  | Can be contacted before interview: YES | | | | | | |  | NO | |  |  |
|  | | | | | | | | | | | | |  |  | | | | | | | | | | | |
| Position in Company/Relationship: | | | | | | | | | | | | |  | Position in Company/Relationship: | | | | | | | | | | | |
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| **Declaration** | | | | | | | | | | | | | | | | | | | | | | | | | |
| The information given on this application is true and complete. I agree that any omission, falsification or misrepresentation in the application form may be grounds for rejecting this application or subsequent dismissal if appointed. This applies equally to any other personal information I may provide during the course of my employment. I authorise the storage and processing of personal information contained in this form for the purposes of equal opportunities monitoring and the preparation of other personnel records. I confirm I am not on List 99, disqualified from working with children or subject to sanctions imposed by a regulatory body. | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature: | | |  | | | | | | | | | | | | Date: | | |  | | | | | | | |
| Full Name (Printed): | | | | |  | | | | | | | | | | | | | | | | | | | | |
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| Bishop Burton College is committed to Equal Opportunities and is concerned that decisions relating to employment are made with regard only to the requirements of the job. To ensure that applicants are treated fairly and that there is no evidence of discrimination, employment decisions are monitored.  Thank you for your co-operation. Please ensure you return this sheet together with your application form. | | | | | | | | | | | | | | | | | | | | | | | | | |
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| ONCE COMPLETED PLEASE EMAIL TO human.resources@bishopburton.ac.uk | | | | | | | | | | | | | | | | | | | | | | | | | |

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