

11. LETTER OF APPLICATION (continued)

12. EQUAL OPPORTUNITIES POLICY

The Governing Body of Sawyers Hall College of Science & Technology is an Equal Opportunity Employer. Its obligations not to discriminate against minority racial groups, people of either sex, or the disabled is recognised. It also operates an equal pay policy.

13. DECLARATION

PROTECTION OF CHILDREN: DISCLOSURE OF CRIMINAL BACKGROUND OF THOSE WITH ACCESS TO CHILDREN

The job for which you are applying involves substantial opportunity for access to children. It is therefore exempt from the Rehabilitation of Offenders Act 1974. You are therefore required to declare any convictions or cautions you may have, even if they would be otherwise regarded as 'spent' under this act. The information you give will be treated in confidence and will only be taken into account in relation to an application where exemption applies. The Governors are also entitled under the arrangements introduced for the protection of children, to check with the Police for the existence and content of any criminal record of the successful applicant. Information received from the Police will be kept in strict confidence and will be destroyed immediately the selection process is completed. The disclosure of a criminal record will not debar you from appointment unless the selection panel consider that the conviction renders you unsuitable for appointment. In making this decision, the panel will consider the nature of the offence, how long ago and what age you were when it was committed and any other factors which may be relevant.

Failure to declare a conviction, may however, disqualify you from appointment, or result in summary dismissal if the discrepancy comes to light.

Any personal information entered on this form may be held on computer files.

To the best of my knowledge and belief the information given in this application is accurate. I understand that failure to disclose any relevant information may result in withdrawal of a job offer or of a Contract after appointment.

Signature: _____ Date: _____

Acknowledgements

Thank you for your interest in this post. If you wish your application to be acknowledged, please enclose a stamped addressed envelope. Completed forms should be returned to The Principal, Sawyers Hall College of Science & Technology, Sawyers Hall Lane, Brentwood, Essex. CM15 9DA. (Telephone: 01277 220808 Fax: 01277 228142)



APPLICATION FORM FOR SUPPORT STAFF

Post Applied For: _____

1. PERSONAL DETAILS (block letters please)

Surname: _____	Forename(s): _____	Title: _____
Address: _____ _____		Date of Birth: _____
Telephone number: _____		Age: _____
Mobile number: _____		National Insurance Number
E-mail Address: _____		_____

2. PRESENT POSITION

Job Title: _____	Employer: _____
Date Appointed: _____	Address: _____ _____
Gross Annual Salary: _____	_____
Notice Required: _____	Telephone number: _____

3. BRIEF OUTLINE OF DUTIES

4. PREVIOUS EMPLOYMENT (Continue on a separate sheet if necessary)

Employer	From	To	Job Title	Salary	Reason for Leaving

5. EDUCATION, TRAINING & QUALIFICATIONS

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HIGHER EDUCATION (in chronological order)

Place of Study (University, College, Polytechnic etc.)	Dates		F/T or P/T	Main Subjects	Subsidiary Subjects	Qualifications (Degree, Cert, Diploma etc.)*
	From	To				

*Please indicate class of degree

SECONDARY EDUCATION & EXAMINATION RESULTS (in chronological order)

Name & Type of School	From	To	List of all examinations passed with levels and grades; GCSE, 'O' Level & 'A' Level grades must be listed	Date Passed

OTHER EDUCATION & TRAINING

College / Organisation	From	To	F/T or P/T	Details of course and qualification gained

6. INDUSTRIAL, PROFESSIONAL, CLERICAL OR SOCIAL WORK AFTER THE AGE OF 18 (inc. H.M. Forces)

Name & Address of employer(s)	Nature of employment & position held	Inclusive period of service						F/T or P/T state proportion if P/T
		From			To			
		D	M	Y	D	M	Y	

7. COURSES ATTENDED WITHIN LAST THREE YEARS Including organising body, title of course & duration

Course Details	Dates	Course Details	Dates

8. HEALTH (No application will be processed without completion of answers to all parts of this Section)

Please tick one of the boxes below indicating how many days absence you have had in the past **TWO** years for personal illness and / or illnesses in the family.

0-5 days
 6-10 days
 11-15 days
 16-20 days
 20 days or more

Please give brief details of all absences due to illness, exceeding five days in the past three years:

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Are you registered Disabled? Yes No If yes, give RDP number:

9. LEISURE ACTIVITIES

Please give details of your recreational & cultural interests, voluntary work and any other work with young persons you consider to be relevant. All candidates should indicate extracurricular activities, sports, clubs etc. with which they would be prepared to assist.

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10. REFERENCES WILL BE CONTACTED BEFORE ANY INTERVIEWS UNLESS OTHERWISE REQUESTED. If either of your referees would have known you by another name, please give details.

Name:.....	Name:.....
Address:.....	Address:.....
.....
.....
Telephone:..... Status:.....	Telephone:..... Status:.....
E-mail Address:.....	E-mail Address:.....

11. LETTER OF APPLICATION

Please include any information which will support your application for this post. If necessary, attach additional sheets.

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