



Tollbar MAT

Family of Academies

Please include a recent photograph of yourself with this form.

Affix here, or attach it separately to your email.

Support Staff Application Form

APPLICATION DETAILS

Post Applied For

PERSONAL DETAILS

Surname

First Names

Date of Birth

 / /

National Insurance Number

CONTACT DETAILS

Address

Postcode

Telephone (Daytime)

Telephone (Evening)

Mobile

Email

PRESENT EMPLOYMENT

Name and Address of Employer

Type of Business

Date of Appointment

DD	/	MM	/	YYYY	To	DD	/	MM	/	YYYY
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Title of Post Held

Role and Specific Responsibilities

Salary and Grade/Scale

PREVIOUS EMPLOYMENT

(Please include voluntary and/or domestic activities where appropriate.)

Name and Address of Employer	Position Held	Dates		Salary	Reason for Leaving
		From	To		

PREVIOUS EMPLOYMENT (continued)

Name and Address of Employer	Position Held	Dates		Salary	Reason for Leaving
		From	To		

EDUCATION—Higher and Further Education

College/University	Dates		Qualifications (Degree Class and Subjects Studied)
	From	To	

Please give particulars, including dates, of any qualifications other than a degree .

EDUCATION—Secondary School Education

Secondary School Attended	Dates		Type (e.g. GCSE/A-Level)	Subject (please list all GCSEs, A Levels and equivalents separately)	Grade
	From	To			

EDUCATION—Other

COURSES ATTENDED IN THE LAST FOUR YEARS

Course	Duration

OTHER INTERESTS/APTITUDES IN SUPPORT OF THIS APPLICATION

Empty box for listing other interests or aptitudes.

NOTICE REQUIRED BY PRESENT EMPLOYER

Empty box for providing notice required by present employer.

Date when you could commence employment

DD	/	MM	/	YYYY
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REFERENCES

1 This referee should be your current or most recent employer.

Name

Status

Address

Postcode

Telephone

Email

name@example.com

May we contact this referee prior to interview?

 YES NO

2

Name

Status

Address

Postcode

Telephone

Email

name@example.com

May we contact this referee prior to interview?

 YES NO

NB: The MAT reserves the right to verify claims made on this application form.

RELATIONSHIPS

Are you related to any member of staff or a member of the Board of Directors? YES NO

If YES, state the names of the members of staff or Directors and the relationship.

Are you related to any students at an Academy within the MAT? YES NO

If YES, state the names of the students and the relationship.

CRIMINAL CONVICTIONS

This question is asked in accordance with the Rehabilitation of Offenders Act 1974 (Exceptions order 1975).

Do you have any spent/unspent criminal convictions and/or cautions, reprimands or final warnings? YES NO

If YES, please provide details.

DECLARATION

I agree that, during the course of any employment, I will inform the Chief Executive Officer immediately of any conviction for a criminal offence (other than minor traffic and parking offences).

The particulars are correct to the best of my knowledge and belief.

Signed

Date

DD	/	MM	/	YYYY
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(Although completed application forms received by email will be accepted, you will be requested to sign this application if you are invited for interview.)

This application should be sent to: Tollbar Multi Academy Trust
Station Road
New Waltham
GRIMSBY
DN36 4RZ

Telephone: 01472 502297
Fax: 01472 502290
Email: personnel@tollbarmat.org

To arrive no later than: (Please see advert)

Applicants offered an appointment may be required to satisfy the MAT's medical advisers of their fitness for the post.

Please append a letter and photograph in support of your application.



Equal Opportunities Monitoring Form

Tollbar Multi Academy Trust is committed to a policy of equal opportunities and it is our approach to select the right person irrespective of sex, sexual orientation, age, race, ethnic origin, disability or gender reassignment.

Please complete this form which is voluntary and will **not** be made available to people who read the application form itself. The form will be used to monitor the effectiveness of the equal opportunities policy.

THIS FORM IS NOT PART OF THE SELECTION PROCESS.

Forename(s) in full

Surname

Title

Post Applied For

Department

My ethnic origin is:

- Black African (BA)
- Black Caribbean (BC)
- Black Other (BO)
- Indian (IN)
- Pakistani (PA)
- Bangladeshi (BG)
- Chinese (CH)
- Irish (IR)
- White (WH)
- Other (OT) *Please specify:*

Age range:

- Under 25 (1)
- 25–34 (2)
- 35–44 (3)
- 45–54 (4)
- 55–64 (5)
- 65 or over (6)

Are you:

- Male Married
- Female Single

Is anyone dependent on you for care? YES NO

Have you any special requirements for interview (e.g. sign language, interpreter, wheelchair access)?

We guarantee to interview anyone with a disability who meets the minimum criteria for the post.

Where did you see this position advertised?

Guidance Notes

1. EMPLOYMENT DETAILS

Please ensure your employment details and dates are continuous, document your major responsibilities starting with your current employer.

2. CRIMINAL CONVICTIONS

The post you are applying for involves the following activities and is exempt under the Rehabilitation of Offenders Act. This means that you must tell us about all convictions and cautions—even from a long time ago. These posts are those with regular, unsupervised access to:

1. Children under sixteen.
2. Children with special needs under eighteen.
3. Children under eighteen in residential care.

See DBS guidelines enclosed.

3. MONITORING FORM

We are committed to a policy of equal opportunities therefore we have a monitoring process which is used to ensure that no group is put at disadvantage either directly or indirectly because of sex, sexual orientation, age, race, ethnic origin, disability or gender reassignment. The monitoring form is for information purposes only. It will be removed from the main body of the form and is not used in any way for selection purposes.

Please note:

- marital status—married includes permanent, live in relationships
- dependent—this includes children, disabled or the elderly

4. ADVERTISING

To ensure that the MAT obtains value for money for its advertising it is important for us to know where applicants see the post advertised.

Please return the application and monitoring form to:

Tollbar Multi Academy Trust
Station Road
New Waltham
Grimsby
North East Lincolnshire
DN36 4RZ

Email: personnel@tollbarmat.org



Reference Request Authorisation Form

We request that you give your permission for Tollbar Multi Academy Trust to ask for details of absences, and the reason for them, which you have had over the last two academic years.

Tollbar Multi Academy Trust will respect that this information will be treated confidentially. All documentation relating to the application will be destroyed upon completion of the recruitment process. This information will not be passed on to any other organisation.

All rights under the Equality Act 2010 will be respected.

DECLARATION

Please tick one: I GIVE MY PERMISSION... I **DO NOT** GIVE MY PERMISSION...

...for Tollbar Multi-Academy Trust to request details of any absences that I may have had during the past two academic years.

Signed

Name

Date

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