

Teaching Post Application Form

Thank you for downloading Durham County Council's Teaching Post Application form.

This form should only be used to make applications for advertised teaching jobs.

If you wish to fill in an application form by hand it is available in PDF format. Alternatively, phone the contact telephone number detailed on the advert of choice to receive an application form in the post.

How to submit Your Job Application Form

Please fill in the following pages, ensuring you complete all relevant parts.

Once you have completed your application form, please ensure you have detailed which post it is you are applying for and that it is sent to the correct address. The address will be detailed on the advert of choice. Please note if application forms are received late or sent to the incorrect address they are at risk of being excluded from the recruitment process.

Problems filling in this form or requests for other formats

If you have any queries or problems filling in this form and it isn't in the guidance notes document or you need this form in another format such as large print or Braille, then please:

Email us at hrschools@durham.gov.uk; or

Telephone the HR Schools team on 03000 267247 (24 hour answerphone service) or Fax us on 0191 328 0067 (outside the UK, please replace the first 0 with +44).

Return completed forms as detailed on the advert, i.e. to the school

Vacancy Reference Number	
Equal Opportuni	ties Monitoring Form
solely on their merits. Therefore we need to cunlawful discrimination. To help us we sho	want to ensure that all applicants are considered check that decisions are not influenced by unfair or ould be grateful if you would complete this short feel happy to do so. Your answers will be treated d for statistical purposes.
1. Are you:	Male Female
2. How old are you:	Prefer not to say
effect on your ability to carry out normal day lasted, or is likely to last, for over a year.	with a disability? nent which has a substantial and long-term adverse -to-day activities. Long-standing means that it has No
4. What is your religion or belief?	
Hinduism Hinduism	Judaism Baha'i Sikhism No Religion Buddhist Prefer not to say se state)
5. How do you describe your sexuality?	
=	Bisexual Prefer not to say Gay Woman / Lesbian
6. Please describe your ethnic origin?	
White ☐ British ☐ Irish ☐ Any other White background	Black or Black British Caribbean African Any other Black background
Arab or Middle Eastern Arab North African Any other Arab or Middle Eastern Background	Travelling Community ☐ Gypsy/Roma ☐ Traveller of Irish Descent ☐ Other member of the travelling community
Asian or Asian British Indian Pakistani Bangladeshi Chinese Any other Asian background	Mixed White & Black Caribbean White & Black African White & Asian Any other Mixed Background
Other ethnic groups: Please state	Prefer not to say Prefer not to say
7. What is your Relationship Status?	
Married/Civil Partnership	Prefer not to say

Durham County Council

Teaching Post Application Form

Strictly Confidential



Please read the Teaching Post Guidance Notes before completing this form

Trease read the reaching rost Saldance No	tes before completing this form
To be complete	ed by the Applicant
Post Ref. No:	Post Title:
School/Location:	Closing Date:
Surname:	Title:
Previous Surname (s):	
Forename(s):	National Insurance Number:
Address:	Telephone No: Home
	Mobile:
Postcode:	Work (if convenient):
E-mail address:	
Job Share If this post is open to job share, do you wish to	apply for this post in a job share capacity?
Yes	□ No
Please state where you saw the advertiseme	ent for this post
Durham County Even	ing Chronicle Northern Echo Spaper Newspaper
☐ Vacancy Bulletin ☐ Spec	ific Journal DCC Intranet
	entreplus Fish4Jobs Website
TES/TES Online North	neastjobs Other
Do you consider yourself to be a person with physical or mental impairment which has a seffect on your ability to carry out normal day-that it has lasted, or is likely to last, for over a you be invited for interview if they meet the specification.	substantial and long-term adverse to-day activities. Long-term means vear. Applicants with disabilities will
☐ Yes ☐ No	☐ Prefer not to say
If you have answered yes please detail below a interview and we will try to make the necessary	·

Important Information

FOR POSTS WHICH REQUIRE A DBS CHECK ONLY - AS STATED ON THE JOB ADVERT/JOB DESCRIPTION

The amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are 'protected' and are not subject to disclosure to employers and therefore cannot be taken into account. Further guidance and details on the criteria on the 'filtering' of these cautions and convictions can be found on the Disclosure and Barring Service website (www.gov.uk/dbs)

Do you have any convictions, cautions, reprimands or final warnings that are not 'protected' as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (amended in 2013)? YES / NO

If YES, please provide relevant details of the offence, date of offence and sentence below. If you would prefer not to include this information on the application form, please provide the details in a sealed envelope addressed to:

Team Leader – HR Operations & Data, Durham County Council, County Hall, Durham, DH1 5UL marked 'Strictly Confidential' – For the attention of the Lead Officer – only to be opened by the addressee' also please ensure that you state the job title of the job you are applying for and the job reference number (as detailed on the job advert).

Data Protection Statement

The Council is committed to confidentiality and complies with the Data Protection Act 1998. All information will be handled and stored sensitively and used only for its intended purpose.

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Under the Council's new constitution you are required to state in writing whether to the best of your belief you are the parent, grandparent, partner, child, step-child, adopted child, grandchild, brother, sister, uncle, aunt, nephew or niece of an existing Councillor or Officer of the Council; or of a partner of such persons.

Name	Relationship	
Canvassing of Mem	ers of the Council or any Committee of the Council or any appointing	officer

Canvassing of Members of the Council or any Committee of the Council or any appointing officer directly or indirectly for any appointment with the Council is prohibited and shall, if deemed appropriate, disqualify the candidate for that appointment.

I have read the guidance notes including the information regarding Criminal Convictions and I declare that the information I have given is true in all respects. I understand that false information may render me liable for dismissal if I am appointed.

I agree to the above statement and will sign and date a copy of this application as a true record if I am invited for an interview:

Signature:	Date:	

(For Office Use Only
Candidate Ref. No:

Post Title and Ref. No:

A Education

Secondary Education							
N.B. appointment will			ct to receip	ot of officia	I certificates in	support of below.	
(Please use continuation sheets if required)							
School attended 1	Qualifications		Subject		Date	Grade	
Higher Education: Please indicate institu	ition attended	d					
T loade maleate matitu			Dogge	inlone	Data of	Cubiost Class	
	From	То	Degree,Diploma, Certificate		Date of Award	Subject, Class, Division	
Degree							
Higher/Advanced Degree/Diploma/ Certificate							
NPQH		Yes	Date obta	ained		☐ No	
In-Service Training:						·	
Name of Establishme	nt	From	То	Course T	aken		
Subsidiary subjects of	ffered, e.g. G	Games, Musi	ic				
Particulars of residence	ce abroad (fo	or modern la	nguage po	osts)			

B Employn	nent Deta	ils								
				Teaching Se	ervice					
(1) Present A	ppointment	t (please st	ate)							
Please state v	vhether pre	sent appoi	ntment is permanent	or temporary						
Full or Part time	Salary Gindicating a	rade/Group any additiona vances	Name of Estab	Name of Establishment		No. on Roll	Age Rar	Range L.A.		Date of Appointment
			list most recent first)							
*Pos	t	Full or Part time	Salary Grade/Group indicating any	Name of Establishme		No. on Roll	Age Range	L.A.	Emp	loyment Dates
			additional allowances						To	From
* e.a. D.H A.F	H.T., A.S.T.,	H.D. (Enalis	sh): H.Yr: H.Fac: H.Ho	use. etc.: Q.A. F	ast Tra	ı ack Teacher				

Employment Details Do you have any additional employment which you intend to continue if appointed to this post? Yes No If yes, please detail the nature of the work and the hours: Period of notice required or termination date for current employment: **Person Specification:** Please use this section to demonstrate that you have the essential and where possible desirable experience, skills and knowledge as stated on the person specification of the post for which you are applying. Candidates who do not evidence that they meet the essential qualifications and experience listed on the person specification will not be shortlisted. (Please use continuation sheets if required).

C Full Employment History

Name & Address of	Appointment	Dates (dd/mm/yy)				
Employer	held/Grade &/or salary (if any)	From	То	Reason for leaving		
D Additional Info	ormation					
Subject (s) Secondary	School only:					
Department of Educat	ion Ref. No:					
General Teaching Cou	General Teaching Council No:					
To which Superannuation Act (if any) are you now subject? e.g. Local Govt, Teachers etc:						
To be completed in case of general application only						
In which area(s) of the	County do you wish t	o teach?				
Do you want full time,	part time, permanent	or temporary v	vork?			
Have you already give	n notice to your prese	nt employer?	☐ Yes	☐ No		
If Yes when will you be able to commence?						
If No how much notice	are vou required to g	ive?				

(continue on separate sheet if necessary)	
E Referees	
Give name, job title, relationship to referee and a to whom a reference may be made. Referee 1 sh Next of kin or immediate relatives should not be n	amed as referees.
<u>-</u>	revious employers and line managers prior to
Referee 1 Name:	Referee 2 Name:
Job Title:	Job Title:
Relationship to Referee:	Relationship to Referee:
Address:	Address:
Post Code:	Post Code
Telephone No:	Telephone No:
E-mail:	E-mail:
	Give name, job title, relationship to referee and a to whom a reference may be made. Referee 1 sh Next of kin or immediate relatives should not be not be relative to seek references from any or all printerview. Referee 1 Name: Job Title: Relationship to Referee: Address: Post Code: Telephone No:

N.B. Appointment will only be confirmed subject to satisfactory references.

D Additional Information

D Additional Information
Do you have any additional information that might be helpful to the Governors/Appointment Panel
(continue on separate sheet if necessary)

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(continue on separate sheet if necessary)

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