



Please return completed form to:
Georgestephenson.high@northtyneside.gov.uk

or

Ian D Wilkinson
Headteacher

George Stephenson High School
Southgate
Killingworth
Newcastle upon Tyne
NE12 6SA

Application Form – Non Teaching

Vacancy Reference Number:	
Post applied for:	
Closing date:	

The information you provide during the recruitment process will only be used for the purposes of progressing your application. The School respects your right to privacy and full details of how we use the information collected from you is contained in our privacy notice which is available on the Schools own Website, together with details of your rights under the General Data Protection Regulations (GDPR).

As indicated on our application form the “Schools - North Tyneside” brand is used by a number of Schools in the North Tyneside area as part of their recruitment process; a number of these schools are Foundation, Trust or Voluntary aided schools and in those instances the Governing Body rather than North Tyneside Council is the direct employer.

Part A: Personal details

Mr/Mrs/Miss/Ms/Other			
Surname		Forenames	
Address Inc Postcode		Known as (if applicable)	
Home tel. Number		Work tel. number	
E-mail (*)		May we call you at work?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Mobile		Best method of contact	

(* Please note, we will use this email address to contact you about your application and we will continue to use this email address for any communications thereafter.)

Your right to work in the UK

Are you eligible to work in the UK?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you subject to immigration restrictions?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Please give details of any restrictions and current work permits including the type of permit, the number and the expiry date.		

Positive about Disabled People 'Disability Confident' employer

The School is committed to the employment and career development of people with disabilities, as part of our policy we guarantee an interview to all applicants with disabilities who have demonstrated that they have skills, knowledge and experience required for the post. If you wish to be considered for an interview under this scheme, please tick the box in the declaration below.

What do we mean by disability?

To be eligible for the Guaranteed Interview Scheme you must have a disability or long-term health condition which has a substantial and adverse effect on your ability to carry out normal day-to-day activities. The disability could be physical, sensory or mental and must be expected to last for at least 12 months

DECLARATION

I consider myself to have a disability as defined above and I would like to apply under the Guaranteed Interview Scheme.

Assistance with interviews

To ensure we do not create any barriers in our selection process and to help us implement our equality policy effectively, please state below if you would like us to provide any assistance for your interview:

Ex-Armed Forces Personnel

The Employer is committed to supporting those who have served in the Armed Forces into employment. As an employer we guarantee an interview to all applicants who have served with the Armed Forces who meet the essential and desirable criteria for the post. Please note if you think you are eligible under this commitment.

Yes No **Driving licence**

Do you hold a full current driving licence?

Yes No

If the role you are applying for will involve you driving a Council Vehicle please complete the next two questions

Do you have any endorsements?

Yes No

Details:

Reference request

Please give the names and contact details for two referees. If you are in employment/have recently left employment one should be your current line manager (or your most recent manager/employer). If you have just left full time education and/or have no employment history, one reference from your education provider should be provided or a character reference. Character references are acceptable if employment references cannot be taken. However, they cannot be accepted from relatives or friends.

If and only if you are offered a position with the School will we contact your referees using the details you provide. You should therefore ensure that anyone whose details you have given us has agreed to provide a reference for you.

I consent to my references being contacted if I am offered employment with the School

Reference 1		Reference 2	
Name		Name	
Job title		Job title	
Organisation		Organisation	
Address		Address	
Postcode		Postcode	
Phone		Phone	
E-mail		E-mail	
Connection with you		Connection with you	
Reference 3¹ (see foot note below)		<p>If you are applying for a post which involves working with children and young people or vulnerable adults, there is a requirement for a reference from employment where you have worked with children and young people or vulnerable adults. If your first 2 referees are not from this employment, please provide details of a 3rd referee who we can request a reference from.</p>	
Name			
Job title			
Organisation			
Address			
Postcode			
Phone			
E-mail			
Connection with you			

¹ A third reference is only necessary if the first two references are not from an employment which involves working with children and young people or vulnerable adults.

Criminal convictions

If your application is successful for a post with a reference pre-fixed with 'DBS', you will be required to complete a DBS Application form online. A criminal record will not mean that you won't be considered for this post, but the nature of the offence and how long ago it was committed will be looked at when deciding on your suitability for the post. For information regarding transgender issues, contact DBS sensitive applications team:

sensitive@db.gov.uk or telephone 0151 676 1452

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 (as amended in 2013). Further guidance on when cautions or convictions are deemed to be protected is in the guidance notes.

Yes

No

If yes, please provide details below including the nature of offence, date committed and any other relevant factors:

Are you registered with the DBS update service?

Yes

No

If Yes, do you give NTC permission to check the update service when it is appropriate to do so?

Yes

No

If Yes, please provide your DBS certificate number:

Declaration

Please make sure all parts of this and the related application forms are completed before signing this declaration:

I certify that to the best of my knowledge all the information I have given is complete, correct and factual. I understand that deliberately giving false or incomplete answers would exclude me from consideration, or in the event of my appointment, could result in dismissal without notice.

Please note: By submitting this form electronically you are accepting this declaration.

Signed:

Date:

Part B: Employment and education history

Please try to provide as much information as possible; this will help us determine your suitability for the post.

Current or most recent employment (full history to be completed in the next section)

Please tell us about your current or most recent employment. (If you have just left full time education and have no employment history, you can detail your education in this section.)

Current / most recent employer or education establishment and address:				
Job title (if applicable):				
Dates of employment or education:	From:		To:	
Salary(if applicable):				
Main duties:				
Reason for leaving (if applicable):				
Notice period required (if applicable):				

Previous employment

Please detail your previous employment, stating your main duties relevant to the role, starting with your most recent first. Please identify and explain any gaps in your employment history (i.e. unemployment, study etc). Please use an additional sheet if required

Job title, Employer's name and address	Main duties	Dates of employment		Salary	Reason for leaving
		From:	To:		

Education, training and qualifications

Please give details of your qualifications and work-related training, starting with the most recent first (including secondary school).

Place you studied at	Dates studied (from and to)	Qualification	Level	Date Achieved

Professional registration

Please detail any professional bodies you hold membership of which are relevant to the post applied for.

Professional body	Level of membership and membership number	Expiry
Teachers Reference Number if applicable:		

Skills, knowledge and experience

Using the Person Specification as a guide, please tell us how you feel your skills, knowledge and experience are relevant to the post, giving examples. Please see the guidance for help with completion of this section and for further information.

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Further information

Please provide any further information not covered by the previous sections that you would like to give in support of your application.

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Part C: Equal opportunities form

This information is only used to measure the effectiveness of our Equality Policy. The HR Administration team will remove Part C when they receive your application and it will not be seen by anyone else involved in the selection process. Our intention is to select the best candidates for the job regardless of their: age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage or civil partnership and pregnancy or maternity.

A. Gender and age			
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of birth	
Do you identify yourself as transgender?	Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say <input type="checkbox"/>	Age at last birthday	

B. Marital status			
<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Civil Partnership	<input type="checkbox"/> Legally Separated
<input type="checkbox"/> Widowed	<input type="checkbox"/> Divorced	<input type="checkbox"/> Living together	<input type="checkbox"/> Domestic Partner

C. Sexual orientation			
<input type="checkbox"/> Heterosexual	<input type="checkbox"/> Gay / Lesbian	<input type="checkbox"/> Bisexual	<input type="checkbox"/> Prefer not to say

D. Disability	
In the Equality Act 2010, a person has a disability if they have a physical or mental impairment and the impairment has a substantial and long term adverse effect on their ability to perform normal day-to-day activities.	
Do you consider yourself to meet this definition?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide details:	

E. Caring responsibilities		
A carer is someone, who, without payment, provides help and support to a partner, child, relative or friend, who could not manage without their help.		
Do you have any caring responsibilities for dependants? (If yes, please tick all that apply):	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<input type="checkbox"/> Primary carer of a child/children (under 18)	<input type="checkbox"/> Primary carer of disabled child/children	<input type="checkbox"/> Primary carer of disabled adult (18+)
<input type="checkbox"/> Primary carer of older person/people (65+)	<input type="checkbox"/> Secondary carer	<input type="checkbox"/> Prefer not to say

F. Religion and belief			
<input type="checkbox"/> Buddhist	<input type="checkbox"/> Christian	<input type="checkbox"/> Hindu	<input type="checkbox"/> Jewish
<input type="checkbox"/> Muslim	<input type="checkbox"/> Sikh	<input type="checkbox"/> None	<input type="checkbox"/> Prefer not to say
<input type="checkbox"/> Other Religious belief (please specify):			

G. Ethnicity - Please tell us which ethnic group you belong to (please mark one):		
Asian / Asian British	Bangladeshi Indian Pakistani Any other Asian background (please specify) _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Black British / Black / African / Caribbean	African Caribbean Any other Black/African/Caribbean background (please specify) _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Chinese	Chinese Any other Chinese background (please specify) _____	<input type="checkbox"/> <input type="checkbox"/>
Mixed / Multiple Ethnic Groups	Mixed Asian Mixed African Mixed Caribbean Any other Mixed/multiple ethnic background (please specify) _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
White	British English British Welsh British Scottish British Other Irish Any other White background (please specify) _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Other Ethnic Group	Any other ethnic background (please specify) _____	<input type="checkbox"/>
Non-disclosure	I do not wish to disclose my ethnicity	<input type="checkbox"/>

Print name _____ Signed _____ Date _____