

Staff Application Form

Privacy Notice

This notice explains what personal data we will hold about you, how we collect it, and how we will use and may share information about you during the application process. We are required to notify you of this information, under data protection legislation. Please ensure that you read this notice as well as our privacy notice which can be provided by the college which details how we use your information.

Why do we Collect this Information?

Once you have submitted an application form, the College will use this information in order to take a decision on recruitment and to take steps to enter into a contract.

What Information do we Collect?

We collect the following information from the application form in order to take a decision as to recruitment:

How we May Share the Information

We may also need to share some of the personal information disclosed with other parties of the college, such as HR consultants and professional advisers. Usually, information will be anonymised but this may not always be possible. The recipient of the information will be bound by confidentiality obligations. We may also be required to share some personal information as required to comply with the law.

How Long we Keep your Information

We keep the personal information that we obtain about you during the recruitment process for no longer than is necessary for the purposes for which it is processed. How long we keep your information will depend on whether your application is successful and you become employed by us, the nature of the information concerned and the purposes for which it is processed. Full details on how long we keep personal data for is set out in our data retention policy

Personal Details

Title:	Full Name:
Present Address:	All Previous Names:
	Home Phone No:
	Mobile or Work No:
	National Insurance No:
Email Address:	Where did you see this post advertised?
Do you hold a Valid UK Driving License?	Do you have a Current Right to Work?

Current Employment

Name and address of current or most recent employer:	Job Title:
	Current Salary:
	Date Appointed:
	Date Available:
Outline of Responsibilities:	Reason for Seeking Other Employment:

Previous Employment (full Employment History for the Past 10 Years)

Name and address of current or most recent employer:	Job Title:
	Current Salary:
	Date Appointed:
	Date Available:
Outline of Responsibilities:	Reason for Seeking Other Employment:

Name and address of current or most recent employer:	Job Title:
	Current Salary:
	Date Appointed:
	Date Available:
Outline of Responsibilities:	Reason for Seeking Other Employment:

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	Current Salary:
	Date Appointed:
	Date Available:
Outline of Responsibilities:	Reason for Seeking Other Employment:

Gaps in Employment (please use the area below to reference any Gaps in your Employment)

Reason for Gap in Employment:	Start Date
	End Date:

Reason for Gap in Employment:	Start Date
	End Date:

Education

Name of Establishment	FT or PT	Qualification Attained	Grade	Date

Training

Name of Course	Organising Body	Brief Description of Course Content	Date

References

Your current or most recent employer must be one of your references (or training provider for NQTs). The college reserves the right to contact any of your previous employers for a reference, if an offer of employment has been made to you or is contemplated. Relatives are not acceptable, even if they are your employer.

Full Name:	Full Name:
Title:	Title:
Address:	Address:
Telephone No:	Telephone No:
Fax No:	Fax No:
Email Address:	Email Address:
Do you give the College Permission to Request a Reference from this Referee Prior to Interview?	Do you give the College Permission to Request a Reference from this Referee Prior to Interview?
Have you ever been known by any other names?	

Miscellaneous Information

Are you related to or the partner of any school governor?

If yes, please give details. Such a disclosure will not disqualify you from consideration. However, the failure to declare such a relationship may disqualify you, or may be dealt with under the appropriate procedure which may include the Disciplinary Procedure.

How did you become aware of this vacancy?

Do you have Anything Else you Feel the College Should be Aware of?

Please State Below:

Disclosure of Criminal Convictions and Rehabilitation of Offenders Act 1974

The appointment of any member of staff who may have contact with, or access to children or vulnerable adults will be subject to the receipt of a satisfactory disclosure from the Criminal Records Bureau. Please make the following declaration and tick the appropriate box.

'I have read the statement about the council's policy on convictions as detailed in the terms and conditions post and'

☐ I have nothing to declare

☐ I have information to declare and I have attached a sealed envelope containing details

Southend Adult Community College welcomes applicants regardless of Gender, Disability, Age, Ethnicity, Sexual Orientation or Faith.

Southend Adult Community College is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults and expects all staff and volunteers to share this commitment and that students and staff can study and work in an environment free from harassment and bullying.

Self-Declaration

The information stated in this application, together with any accompanying papers is, to the best of my knowledge, correct. I understand that a false entry may lead to either an offer of employment being withdrawn or disciplinary action being taken which could result in dismissal.

Signed Date

Keeping Children Safe in Education - Interview Guidance

Should you be shortlisted for an interview, please be advised that in line with the Keeping Children Safe in Education 2022, online searches would be undertaken as part of our due diligence using information publicly available online.

The interview panel may explore the findings of the searches with candidates at interview.

Thank you for taking the time to apply for a vacancy at Southend Adult Community College.

Please attach your supporting statement to your email or you can fill it in on the page beneath if completing the form by hand.

Once complete please send your application via email to: HR@southend-adult.ac.uk

Statement in Support of your Application

Please use this section to show how your experiences and achievements meet the requirements of this position. Please refer closely to the job description and person specification in this section. Include relevant skills and experience that you have obtained through previous employment, voluntary or community involvement, personal interests or education. If necessary please continue on a different sheet if completing application by hand.

Equality and Diversity Monitoring Form

Southend Adult Community College is an equal opportunities employer and wants to meet its commitment to equality and diversity. This includes not discriminating under the Equality Act 2010, and building an accurate picture of the make-up of the workforce in encouraging equality and diversity. The organisation needs your help and co-operation to enable it to do this, but filling in this form is voluntary.

Please complete this form as part of your application to enable us to monitor each selection stage. The information will not be shared with the shortlisting panel, it will only be used for providing our overall recruitment statistics and is not reported on an individual basis. All personal data supplied on this form will remain confidential and will be managed in accordance with the General Data Protection Regulation.

How Old Are You?

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What is your gender? (Please select all that apply)

<input type="checkbox"/>	Woman/Female
<input type="checkbox"/>	Man/Male
<input type="checkbox"/>	Non-binary
<input type="checkbox"/>	Another / prefer to self-describe (Please Specify)
<input type="checkbox"/>	Prefer not to say

Gender – Additional Information (Please select all that apply)

<input type="checkbox"/>	Transgender
<input type="checkbox"/>	Cisgender
<input type="checkbox"/>	Another / prefer to self-describe (Please Specify)
<input type="checkbox"/>	Prefer not to say

Preferred Pronoun:

<input type="checkbox"/>	He/Him/His
<input type="checkbox"/>	She/Her/Hers
<input type="checkbox"/>	They/Them/Theirs
<input type="checkbox"/>	Another / prefer to self-describe (Please Specify)
<input type="checkbox"/>	Prefer not to say

What is your sexual orientation?

<input type="checkbox"/>	Bisexual
<input type="checkbox"/>	Gay / lesbian
<input type="checkbox"/>	Heterosexual / straight
<input type="checkbox"/>	Another / prefer to self-describe
<input type="checkbox"/>	Prefer not to say

How Would you Describe your Ethnic Background?

Asian or Asian British	<ul style="list-style-type: none"> ○ Bangladeshi ○ Chinese ○ Japanese ○ Indian ○ Pakistani ○ Another Asian background..... (please specify if you wish) 	Mixed	<ul style="list-style-type: none"> ○ Black African & East Asian ○ Black African & South Asian ○ Black African & White ○ Black Caribbean & East Asian ○ Black Caribbean & South Asian ○ Black Caribbean & White ○ East Asian & White ○ South Asian & White ○ Another mixed background..... (please specify if you wish)
		White or White British	<ul style="list-style-type: none"> ○ White British ○ White Irish ○ Eastern European ○ Another white background..... (please specify if you wish)
Black or Black British	<ul style="list-style-type: none"> ○ African ○ Caribbean ○ Another Black background..... (please specify if you wish) 		
Other ethnic group	<ul style="list-style-type: none"> ○ Arab ○ Gypsy or Traveller ○ Another background..... (please specify if you wish) 		

What is your Marital Status?

<input type="checkbox"/>	Co-habiting
<input type="checkbox"/>	Divorced
<input type="checkbox"/>	Married
<input type="checkbox"/>	Single
<input type="checkbox"/>	Widowed
<input type="checkbox"/>	Prefer not to say

Where do you Currently Live?

<input type="checkbox"/>	Channel Islands	<input type="checkbox"/>	Wales – Mid
<input type="checkbox"/>	East of England	<input type="checkbox"/>	Wales – North
<input type="checkbox"/>	East Midlands	<input type="checkbox"/>	Wales – South
<input type="checkbox"/>	London (inc. Greater London)	<input type="checkbox"/>	West Midlands
<input type="checkbox"/>	North East	<input type="checkbox"/>	Yorkshire and the Humber
<input type="checkbox"/>	North West	<input type="checkbox"/>	Another (please specify if you wish)
<input type="checkbox"/>	South East	<input type="checkbox"/>	Prefer not to say
<input type="checkbox"/>	South West	<input type="checkbox"/>	

What is your Religion or Belief?

<input type="checkbox"/>	No religion or 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"/>	Prefer not to say
<input type="checkbox"/>	Other religion or belief (Please Specify)

Do you consider yourself to have a long-term health condition or learning difference that has a substantial or long-term impact on your ability to carry out day to day activities? Examples may include epilepsy, depression, Autism Spectrum Disorder (ASD), or deafness.

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
<input type="checkbox"/>	Prefer not to say

**Which of these Categories Best Represents your Experience of Mental Health Problems?
(Please tick all that apply)**

<input type="checkbox"/>	I have personal experience of mental health problems
<input type="checkbox"/>	I use / have mental health services
<input type="checkbox"/>	I am a family member of somebody who has experienced mental health problems
<input type="checkbox"/>	I care or look after someone with mental health problems
<input type="checkbox"/>	I am a friend to someone who has experienced mental health problems
<input type="checkbox"/>	Another (Please Specify if you wish)
<input type="checkbox"/>	None of the above
<input type="checkbox"/>	Prefer not to say

What is your Current Working Pattern?

<input type="checkbox"/>	Full time
<input type="checkbox"/>	Part time
<input type="checkbox"/>	Other (Please Specify if you wish)
<input type="checkbox"/>	Prefer not to say

Do you have Caring Responsibilities?

<input type="checkbox"/>	None
<input type="checkbox"/>	Primary carer of a child/children (under 18)
<input type="checkbox"/>	Primary carer of a disabled child/children
<input type="checkbox"/>	Primary carer of a disabled adult (18 and over)
<input type="checkbox"/>	Primary carer of an older person
<input type="checkbox"/>	Secondary carer (another person carries out the main caring role)
<input type="checkbox"/>	Other (Please Specify)
<input type="checkbox"/>	Prefer not to say

Is there anything else you would like to share about your experiences or suggestions related to equality and diversity in Southend Adult Community College?

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I understand that the information provided in this form will be used for monitoring purposes and promoting equality and diversity within Southend Adult Community College. I confirm all the information provided is accurate and voluntary.

Employee Signature: Date:

Thank you for completing the Equality and Diversity Form. Your contribution to fostering an all-inclusive workplace is invaluable.