

BROUGHTON HALL CATHOLIC HIGH SCHOOL YEW TREE LANE LIVERPOOL L12 9HJ

Tel: 0151 541 9440 Fax: 0151 259 8448

Email: smithg@broughtonhall.com
Internet: hhtp://www.broughtonhall.com

SUPPORT STAFF APPLICATION FORM

(Before completing this form please read Notes to Applicants on page 12)

PLEASE RETURN THIS FORM TO:

MRS G SMITH
BROUGHTON HALL CATHOLIC HIGH SCHOOL
YEW TREE LANE
LIVEFRPOOL
L12 9HJ

TEL: 0151 541 9440 - FAX: 0151 259 8448

Adapted from CES model - November 2008 (updated Sept 2017)

PERSONAL DETAILS

1. Job Details				
Application for the position of:- CATERING ASSISTANT				
Full time		Part Time		Job Share
At: Broughton Hall	Catholic Hi	igh School		
Where the Gove	erning Bod	y is the employ	er of staff	
In the Local Authori	ty of: Live	rpool		
In the Archdiocese/	Diocese of	: Liverpool		
Please state where y	ou saw thi	s post advertise	ed:	
2. Personal Det	tails			
Title:		First name(s):		Last
				Name:
Former first		Former		Known
Name(s):		surname(s):		as:
*Current			Daytime contact	
Address (including postcode):			number:	
posteducy.			Home telephone	
			number:	
Email address for			Mobile telephone	2:
contact purposes:				
National Insurance			What is your	
Number:			preferred method	ı
			of contact?	
Religious Denomination	on/Faith:			
*If you have lived at y	our current	t address for less	than 5 years pleas	se list all other addresses at which you
have lived during this period with dates.				
Address (2):	Date from	/to:	Address (3)	Date from/to:

3. Most Recent Employment Details				
Current Employment Status:				
Job Title/Role:		Salary Scale (e.g. NJC)		
Spine Point:		Date Awarded:		
State Additional Allowances (if applicable)		Gross Salary:		
Permanent	Temporary \square	Full Time	Part Time	
Employer name and address (including postcode):		Telephone No:		
Date appointed:		Noticed Required: (if applicable)		
If you are not currently	y in employment, please o	onfirm the following:		
Previous Employers name:		Date of leaving & Reason:		

4. Empl	oyment /	History
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Please provide a full history of employment including periods of post-secondary education or training, and part-time and voluntary work. Please start with your most recent employer and finish with the date that you left secondary education. Please ensure that you provide explanations for periods when not employment,

education or training and reasons for leaving.						
From	То	Employment	Name and address	Job	Salary:	Reason for leaving /
MM/YY:	MM/YY:	status:	of employer /	title:		Reason for gap in
		(Employed /	establishment /			employment:
		Education /	voluntary			
		Voluntary work /	organisation			
		Not working)	_			
Other Qualifications						
Please state any other specialisms you have:-						
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Dlease state any other specialisms you have

If there are any periods of time that have not been accounted for in your application e.g. periods spent raising a family/extended travel please give details of them here together with dates. The information provided on this form must provide a complete chronology from the age of 16. Please ensure that there are no gaps in the history of your education, employment and other experience. Failure to provide a full account may lead to your application being rejected.

5. Post-11 Education and Training – please complete in chronological Order						
Full Name & Address of	Full Time/	Dates	Date of	Awaı	rding Body	Qualification
Establishment	Part Time	Attended/	Award			
		From-To				
Post-Graduate Qualification	ons					
*Please state if you hold t	he Catholic Ce	rtificate of Religiou	s Studies (CCRS) oi	r equivalent.	
-						
Higher Education Qualifica	itions					
School/College Qualification	ons				I	
Continued Professional De	velopment: P	ı lease list any course	es you have	comple	ted and/or an	ny professional
development in which you	-	*	-			
(e.g. Teaching Courses/Firs		·	•	·		·
Course Title		Course Provider	Length	of	Dates	Award/Grade (if
			Course	•	T. F	applicable)
					To-From	

6. References. Schools/Colleges of a Religious character are permitted, where recruiting for Teaching posts, to give preference to applicants who are practising Catholics and, therefore, one referee should be your Parish Priest/the priest of the Parish where you regularly worship. It is the responsibility of the Applicant to ensure that all named referees, including Parish Priests, where applicable, have consented to providing a reference. You are advised to read the relevant section of the Notes to Applicants before completing this section. Reference 1: Present School/Employer Job Title: Name: Contact Address (including postcode): Telephone No: **Email Address:** Reference 2: Other Professional/Employer Name: Job Title: Contact Address (including postcode): Telephone No: **Email Address:** Relationship to Referee: Reference 3: Parish Priest/Priest of the parish where you regularly worship or additional Professional Job Title: Name: Contact Address (including postcode):

Email Address:

Telephone No:

Relationship to Referee:

PLEASE NOTE:					
1. We reserve the right to take up references with any previous employer. Please advise if you do not want us					
to do so at this stage and provide reasons.					
2. If any of your referees knew you by another name pleas	e specify that name(s) here:				
Are you (or your spouse/civil partner/partner) related by	<u> </u>	tee to any member of			
the Governing Body or any current employee of the Gove	rning Body?				
*Yes □ No □					
* If Yes – please give details below:-					
, ,					
7. Professional Membership					
Please list any relevant professional bodies of which y	ou are a member:-				
,					
8. Interests & Hobbies					
Please list your interests and hobbies outside of work:					
Trease list your interests and hobbies outside of work.					
O Duiving Lineage Details					
9. Driving Licence Details					
Please list your interests and hobbies outside of work					
Do you hold a full current UK licence?	Yes 🗆	No 🗆			
If yes, what type of licence:	Drivete / Light Condo	Class \square			
	Private/Light Goods	Class \square			
Do you hold a PSV licence which would allow you to	Yes 🗆	No 🗆			
drive a school mini bus?	1E3 L. 	INO L			

10. Supporting Statement.
Please detail why you believe your experience, skills, personal qualities, training and/or education are relevant to your suitability for the post advertised and how you meet the person specification applicable to the post.
You should pay particular attending to the national standards for the position for which you are applying.

Barring Service Checks. i. The Governing Body is obliged by law to operate a checking procedure for employees who have access to children and young people. Please confirm whether you have ever been the subject of any child protection concern either in your work or personal life, or been the subject of, or involved in, any disciplinary action in relation thereto, including any which time is expired. П *Yes No *If Yes, please provide details below:ii. By ticking the box below I hereby confirm that I am not disqualified from working with children and/or have information held about me under section 142 Education Act 2002 (formerly known as inclusion on the DfE List 99: In the event of a successful application an offer of employment may be made to you which is conditional iii. upon receipt of satisfactory Disclosure and Barring Service Checks ("DBS Checks") (formerly CRB Check and ISA Check) in relation to criminal and child protection matters. Please note that a conviction will not necessarily be a bar to obtaining employment. By ticking the box below you hereby consent to a DBS Check(s) being made to the Disclosure and Barring ("DBS") Service:

11. Disclosure of Criminal and Child Protection Matters and Disclosure and

12. REHABILITATION OF OFFENDERS ACT 1974

Service Website. https://www.gov.uk/government/collections/dbs-filtering-guidance

If you have been convicted of a disclosable criminal offence the details must be disclosed on the separate document entitled "Rehabilitation of Offenders Act 1974 – Disclosure Form" together with any cautions or bind overs, pending criminal convictions, criminal actions and/or court hearings against you. The Rehabilitation of Offenders Act 1974 – Disclosure Form must be enclosed with your application in a sealed envelope marked "confidential". If you do not have any disclosable convictions, please complete the relevant section in the Disclosure Form.

Guidance and criteria on the filtering of the cautions and convictions can be found on the Disclosure and Barring

13. DATA PROTECTION ACT 1998				
By ticking the box below I hereby give my consent for personal information considered Personal Data and/or Sensitive Data within the meaning includes recruitment monitoring data) provided as part of this applicance relevant filling systems and to be shared with other accredited organizata Protection Act 1998.	of the Data Protection Act 1998, which cation to be held on computer or other			
14. Immigration, Asylum & Nationality Act 200	06			
The Governing Body will require you to provide documentary evident position applied for and/or of your ongoing entitlement to live and we with the Immigration, Asylum and Nationality Act 2006. More information Notes to Applicants. By ticking the box below you hereby confirm the United Kingdom and you will promptly provide documentary evidence.	work in the United Kingdom in accordance mation can be found in paragraph 17 of the hat you are legally entitled to work in the			
15. Declaration				
If you know that any of the information that you have given in this ap knowingly omitted or concealed any relevant fact about your eligibili attention then your application may be withdrawn from the recruitm	lity for employment which comes to our			
Providing false information is an offence and may result in this application being rejected. If such a discovery is made after you have been appointed then you may be liable to be dismissed summarily. You may also be reported to the National College of Teaching and Leadership (NCTL) (England only) and/or the Education Workforce Council (Wales only) and/or the Police, if appropriate.				
By signing below I hereby certify that all the information given by me both on this form and in any supplementary pages and/or the supporting evidence provided, is correct to the best of my knowledge and belief, that all the questions relating to me have been accurately and fully answered and that I possess all the qualifications that I claim to hold.				
I acknowledge that it is my responsibility as the applicant, if invited for panel which may affect my suitability and/or eligibility to work with o				
Signature Date:				
* The post will be subject to the terms and conditions of the appropriate	ppriate Catholic Education Service model			

NOTES TO APPLICANTS

- 1. Applicants completing a printed version of this form who find they need extra space should use a separate sheet of paper to complete their answer, clearly stating the section number of the question.
- Date of Birth: the Governing Body complies with the Equality Act 2010 and does not discriminate on grounds of age. This is requested in line with best safeguarding practice including 'Safeguarding Children: Safer Recruitment and Selection in Education', DfE/1568 2005.
- 3. The Governing Body complies with the School Standards and Framework Act 1998 and the Equality Act 2010.
- 4. Before signing this form please ensure that every section has been completed.
- 5. The form should be returned as instructed in the details of the post.
- 6. Applicants should attach a separate statement in support of their application.
- 7. Applications will only be acknowledged if a stamped addressed envelope is enclosed.
- 8. Rehabilitation of Offenders Act 1974: You must declare all convictions that you have, including motoring offences and all convictions that have become 'spent'.
- 9. Immigration, Asylum and Nationality Act 2006: Before taking a post applicants should provide one specified document or a specified combination of two documents that prove their entitlement to work in the UK.
 - ✓ A passport showing that the holder, or a person named in the passport as the child of the holder, is a British citizen of the UK and colonies having the right of abode in the UK.
 - ✓ A national passport or national identity card showing that the holder, or a person named in the passport as the child of the holder, is a national of a European Economic Area country or Switzerland.
 - ✓ A residence permit, registration certificate or document certifying or indicating permanent residence issued by the Home Office of the Border and Immigration Agency to a national from a European Economic Area country or Switzerland.
 - ✓ A permanent residence card issued by the Home Office or the Border and Immigration Agency to a family member of a national from a European Area country or Switzerland, who is resident in the UK.
 - ✓ A Biometric Immigration Document issued by the Border and Immigration Agency to the holder which indicates that the person named in it is allowed to stay indefinitely in the UK or has no time limit on their stay in the UK.
 - ✓ A passport or other travel document endorsed to show that the holder is exempt from immigration control, can stay indefinitely in the UK, has the right of abode in the UK or has no time limit on their stay.
- 10. All applicants must note that in accordance with safeguarding vulnerable groups' regime, it is their responsibility to have made any necessary registrations relevant at the time of making this application, required for people working or volunteering with children. Accordingly, applicants are put on notice that no offer of employment will be made until the results of checks from the appropriate body have been received.

16. RECRUITMENT MONITORING INFORMATION

Completion of this section will help us fulfil our general duty under the Race Relations (Amendment) Act 2000 to eliminate unlawful discrimination, to promote equality of opportunity and promote good relations between people of different racial groups, and our specific duty under the Act to monitor, by reference to racial group, applicants for employment and staff in post.

School:	Broughton Hall Catholic High School
Post/Role Title:	
Surname:	
First Name(s):	
Date of Birth:	
Gender:	Male
	Female

THE INFORMATION PROVIDED WILL BE USED FOR MONITORING AND STATISTICAL PURPOSES ONLY AND THIS SECTION WILL BE DETACHED FROM YOUR APPLICATION FORM PRIOR TO SHORTLISTING.

1. ETHNIC ORIGIN

White		Asian, Asian British, Asian English, Asian Scottish or Asian Welsh.	
British		Bangladeshi	
English		Indian \square	
Scottish		Pakistani	
Welsh		Any other Asian background	
Irish		Any other Asian background (please specify)	
Any other White back (please specify)	ground		
Black, Black British, Black English, Black Scottish or Black Welsh		Chinese, Chinese British, Chinese English, Chinese Scottish or Chinese Welsh.	
African		Chinese	
Caribbean		Any other Chinese background (please specify)	
Any other Black backs (please specify)	ground		
Mixed		Other ethnic group	
White and Asian		Other ethnic group (please specify):-	
White and Black Afric	an 🗆		
White and Black Carib	bbean 🗆		
Any other Mixed back (please specify):-	ground		

2. DISABILITY MONITORING

The Equality Act 2010, which came into force in October 2010, places specific and general statutory duties on all public authorities (e.g. local authorities, governing bodies of further and higher education institutions, colleges, universities, and governing bodies of educational establishments maintained by local educational authorities (including schools) to promote disability equality. In order to assist us with our statutory duties, we would be grateful if you could advise whether you have a disability. Please note that you are not obliged to disclose such information but that any information given will be used for monitoring purposes only. It will remain confidential and will not be passed to third parties.

The definition of a disability is a 'physical or mental impairment which has a substantial and long term adverse effect on a person's ability to carry out normal day to day activities'. Some specific conditions

deemed to be disabilities include HIV, cancer, multiple sclerosis and severe disfigurements. Do you have a disability, long term illness (mental or physical), ongoing medical condition or treatment that we should be aware of? Yes No \square Please give brief details of your disability and any reasonable adjustments you anticipate we would need to make to your workplace or equipment to undertake the duties outlined in the job description or that you consider necessary to attend interview. If you are registered disabled please state your number **Please Note:** This does not form part of the selection process. THE INFORMATION CONTAINED IN THIS FORM MAY BE HELD ON A COMPUTER FILE

Data Protection Act
I hereby give my consent for the Recruitment Monitoring Information provided on this form to be held on computer or other relevant filing systems and to be shared with other accredited organisations or agencies in accordance with the Data Protection Act 1998.
Signature: Date: