



Application No:

**PLYMPTON ACADEMY**  
MOORLAND ROAD  
PLYMPTON  
PLYMOUTH  
PL7 2RS  
TEL: 01752 338373

PRINCIPAL: MS LISA BOORMAN  
principal@plympton.academy

**Application for a Support Staff Appointment**

Post Title	
Name	

(Please complete in black ink)

**\*\*Important\*\***

**You should read the notes below before completing this form**

**Returning this form:**

This form must reach us by the closing date, late applications cannot be considered. Please send it to the Principal at the address specified above. Please do not staple the form.

**Documentary evidence:**

Candidates called for interview will be required to bring the following original documents\* to the interview for verification purposes: i) Birth Certificate and ii) Certificates of academic and professional qualifications (where relevant).

**Warning**

If you provide false information, this could lead to dismissal. If you do any sort of canvassing, it will lead to you being automatically disqualified.

\*Photostat copy documents will not be accepted.

The successful applicant will also be required to produce the following documents to comply with a DBS check: Passport or driving licence: photocard type; birth/marriage certificates plus a recent utility bill, credit card statement or bank statement.

## PRESENT EMPLOYMENT (if applicable)

Name and Address of employer:			
Telephone number		Job Title	
Date of Appointment		Present Salary	
Notice Period			
Reason for wishing to leave			
Brief outline of duties			

## 2 PREVIOUS EMPLOYMENT (most recent first)

Employer/Voluntary Organisation	Post Held	Dates	Salary/Grade	Reason for Leaving

### 3 EDUCATION CHECKS (checks on qualifications will be made)

Courses and relevant training: Include results and examinations where applicable	Dates	Checked (office use only)

### 4 MEMBERSHIP OF PROFESSIONAL/TECHNICAL BODIES

Institute or Association	How obtained (e.g. examination or election)	Date	Grade of Membership

### 5 REFERENCES

Two referees are required. One should be from your present or last employer if possible. School leavers should give Principal. If you have not been in employment in recent years, you are welcome to give a suitable alternative referee of your choice.

Name		Name	
Occupation		Occupation	
Company Name		Company Name	
Address		Address	
Post Code		Post Code	
Telephone Number		Telephone Number	
Email Address		Email Address	

Referees will be contacted for all candidates shortlisted for interview.

## 6 LETTER OF APPLICATION

Please write in support of your application, showing how your experience and qualifications are relevant, and how you would contribute to the post.

If you are a disabled person, and because of your impairment, cannot fulfill certain aspects of the Personal Specification, but you feel you can meet the job requirements, in an alternative/adjusted way, you can provide details here.

Please continue on a separate sheet if necessary.

Please ensure your name and other personal details do not appear in this section.

## 7 PERSONAL DETAILS:

DATA PROTECTION ACT: Information from this application may be processed by computer for purposes registered by the School under the data protection legislation. Individuals have the right of access to computerised personal data concerning them.

1	Surname:			
2	Forenames:			
3	Title:			
4	Address (with postcode)			
5	Home/Mobile Telephone No:		Email Address	
6	Date of Birth:		National Insurance Number	
7	Do you need permission to work in the UK?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
8	Are you able to produce documents if asked for at interview which demonstrate that you are entitled to work in the UK?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
9	If this post is open to job share, do you want to be considered for this option?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

## 8 RELATIONS

A candidate for any appointment who knows he/she is related to any member of the School, a Governor of the school or a senior officer is required to disclose that relationship when submitting an application. In educational establishment the designation '**senior officer**' includes Principal, Deputy Head and Heads of Department. For other employees the designation includes anyone paid on Management Grade 1 or above. A candidate who fails to disclose such a relationship shall be disqualified for the appointment and if appointed shall be liable to dismissal without notice.

**If applicable please give details:**

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## 9 REHABILITATION OF OFFENDERS

Because of the nature of the work for which you are applying, this post is exempt from the Rehabilitation of Offenders Act 1974. You will be required to disclose on a separate form all information about any convictions in a Court of Law or any cautions, no matter when they occurred, so that a police check can be carried out if you are offered an appointment. If you are subsequently employed by the School and it is found that you failed to disclose any previous convictions or cautions, this could result in dismissal, or disciplinary action by the School. All information will be treated in confidence and will only be considered in relation to an application for posts to which the exemption order applies.

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 **cannot be taken into account**. Guidance and criteria on the filtering of these cautions and convictions can be found on the Disclosure and Barring Service website.

Have you been convicted of any criminal offence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If yes, please give details:

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## 10 DECLARATION

I declare that the information given is true and accept that if I have given false information it may result in my application no longer being considered or my appointment not being confirmed.

Signed		Date	
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This form must be returned to the Principal of Plympton Academy.

# SCHOOLS MONITORING FORM: PRIVATE AND CONFIDENTIAL

THIS INFORMATION IS FOR MONITORING PURPOSES ONLY, AND WILL NOT BE CONSIDERED AS PART OF THE SELECTION PROCESS

Plympton Academy believes in equal opportunities. Part of this involves ensuring that our recruitment and selection practices are fair, equitable and consistent, with the aim of appointing the best person for the job, and fulfilling statutory duties relevant to equality in employment.

To make equal opportunities meaningful, it is essential that the School monitors the effectiveness of its policy. Please, therefore complete this form. All information will be treated in the strictest confidence, and will not be made available to the selection panel.

Please, therefore complete the following:

1	Job Applied for:					
2	School					
3	Grade:		4	Closing Date		
5	Where did you find out about this vacancy?					
6	What is your sex?	Male <input type="checkbox"/>	Female <input type="checkbox"/>			
7	What is your age?	17-18 <input type="checkbox"/>	19-50 <input type="checkbox"/>	51-65 <input type="checkbox"/>	66-75 <input type="checkbox"/>	76 + <input type="checkbox"/>

## Ethnicity

To which of these groups do you consider you belong? (please tick one box only):

<b>A</b>	<b>WHITE</b>		<b>C</b>	<b>Asian or Asian British</b>	
	British	Yes <input type="checkbox"/>		Bangladeshi	Yes <input type="checkbox"/>
	Gypsy/Traveller	Yes <input type="checkbox"/>		Indian	Yes <input type="checkbox"/>
	Irish	Yes <input type="checkbox"/>		Pakistani	Yes <input type="checkbox"/>
	Any other White Background (please state)			Any other Asian Background (please state)	
<b>B</b>	<b>MIXED</b>		<b>D</b>	<b>Black or Black British</b>	
	White and Black Caribbean	Yes <input type="checkbox"/>		African	
	White and Black African	Yes <input type="checkbox"/>		Caribbean	
	White and Asian	Yes <input type="checkbox"/>		Any other Black Background (please state)	
	Any Other Mixed Background (please state)				
<b>E</b>	Chinese or other ethnic group (please state)				
<b>F</b>	Any other ethnic group (please state)				

## Disability

Do you consider yourself to be a disabled person?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Prefer not to say <input type="checkbox"/>
Would you like to let us know more about your disability? (Please write in).			

## Religion

How would you describe your faith, belief, religion? (Please tick one box)			
Buddhist	Yes <input type="checkbox"/>	Jewish	Yes <input type="checkbox"/>
Christian (including Church of England, Catholic, Protestant and all other Christian denominations)	Yes <input type="checkbox"/>	Muslim	Yes <input type="checkbox"/>
Hindu	Yes <input type="checkbox"/>	Sikh	Yes <input type="checkbox"/>
Other religion (please state)	Yes <input type="checkbox"/>	None	Yes <input type="checkbox"/>
Prefer not to say	Yes <input type="checkbox"/>		

## Sexual Orientation

What is your sexual orientation? (please tick one box)			
Bisexual	Yes <input type="checkbox"/>	Heterosexual/straight	Yes <input type="checkbox"/>
Gay Man	Yes <input type="checkbox"/>	Other (including questioning)	Yes <input type="checkbox"/>
Lesbian/Gay Woman	Yes <input type="checkbox"/>	Prefer not to say	Yes <input type="checkbox"/>

## Marital status

What is your marital status (please tick one box)			
Single	Yes <input type="checkbox"/>	Married	Yes <input type="checkbox"/>
Civil Partnership	Yes <input type="checkbox"/>	Living with partner	Yes <input type="checkbox"/>
Prefer not to say	Yes <input type="checkbox"/>		