



# Walsall Academy

Lichfield Road, Bloxwich, Walsall WS3 3LX

## CONFIDENTIAL

### Application Form for Teaching Post

Post for which you wish to be considered:

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#### 1. Personal Details

Title:	Surname:
Forename(s):	Middle Name(s):
Address:	
Daytime Tel No.:	Evening Tel No.:
Email:	Mobile No.:
N.I. No.:	DfE No.:
Date of Recognition as a teacher:	
Are you in receipt of an Occupational Pension: Yes / No	

#### 2. Education and/or Training

Please provide details of your education and/or training from secondary school through to adult training.

School / College / University	Course	Dates

### 3. Qualifications

Please provide details of your qualifications gained, including grades, from secondary school to current time.

Qualifications	Grade / Level	Date of Award

### 4. Teaching Subjects

Main	Subsidiary	Age range for which trained

## 5. Employment

Please provide details of your full employment profile, commencing with your current position.

Title of Post	Organisation	Age Range	No. on Roll	Salary including allowances	Dates	Reason For Leaving

*Please continue on a separate sheet if necessary*

## 6. Relevant Courses attended during the last three years

Course	Organised By	Dates	Duration

## 7. Additional Information

Please provide a separate statement explaining how your education and experience meet the requirements of this post, and adding any further information which supports your application.

## 8. References

Please give the name, address and status of two persons who can support your application and who have agreed to their names being used. Unless there are good reasons to the contrary, **one of the referees should represent your present employer**. References will be obtained prior to an interview date.

Name, Status and Address	
	Tel:
	Email:
	Fax:
	Tel:
	Email:
	Fax:

## 9. Protection of Children

Please note that applicants will be subject to a Disclosure and Barring Service (DBS) Check in the event of the individual being offered the position.

Only those who pass a DBS Check will be able to take up the post. Please check our recruitment policy statement on the employment of ex-offenders.

I confirm that I understand I will need to pass a DBS Check  Please Tick **YES**

By signing this declaration I confirm that I have read and understood the General Privacy Notice which can be found at <https://www.walsallacademy.com/wp-content/uploads/General-Privacy-Notice.pdf> and consent to my personal data being processed for the purposes of recruitment, in line with the General Data Protection Regulation.

**I declare that the information I have given on this form and additions is correct.**

Signed

Date

Applicants can normally expect to be invited for an interview within three weeks of the closing date. Otherwise they may assume that, on this occasion, their application has been unsuccessful. However, career opportunities may emerge in the future. If you are unsuccessful please indicate if you wish us to hold your form on file to be considered for future similar vacancies.

**YES**

**NO**

Please Tick


For marketing purposes only, how did you find out about this vacancy (please tick):-

	DfE Teaching Vacancies Website
	TES website
	Search engine
	Walsall Academy website
	Thomas Telford Leadership & Teaching Opportunities website ( <a href="https://schoolvacancies.net/">https://schoolvacancies.net/</a> )
	"Word of mouth" friend/ colleague/relative
	Other, please state:

**Please return completed Application Form and attached Monitoring Form to:**

Mr S Rogers – Headteacher  
Walsall Academy  
Lichfield Road, Bloxwich, Walsall, West Midlands WS3 3LX  
Email to: [enquiries@walsallacademy.com](mailto:enquiries@walsallacademy.com)



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## Monitoring Form

This information is kept separate from the rest of your Application Form and is not seen by anyone involved in the selection process.

**Please complete in BLOCK CAPITALS**

Post Title:	
Full Name of Applicant:	
Previous Name(s):	
Preferred Title:	
Date of Birth:	

Please tick as appropriate:

<b>Age</b>	<b>16-18</b>	<input type="checkbox"/>	<b>19-35</b>	<input type="checkbox"/>	<b>36-49</b>	<input type="checkbox"/>	<b>50-59</b>	<input type="checkbox"/>	<b>60-65</b>	<input type="checkbox"/>	<b>Over 65</b>	<input type="checkbox"/>
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**Disabilities:**

Do you consider yourself to be disabled? **Yes / No**

If <b>Yes</b> please provide details:
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**Ethnic Origin:**

Asian or Asian British	Black or Black British	Mixed	White
Indian	Caribbean	White & Black Caribbean	British
Pakistani	African	White & Black African	Irish
Bangladeshi	Any other Black Background	White & Asian	Any other White Background
Any other Asian Background		Any other Mixed Background	

<b>Other Ethnic Group (Please specify)</b>

How did you find out about this vacancy?