



Application Form

THE INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE

Please complete all sections in black ink or electronically

Post applied for:

Part A: Personal Information		
Title: Dr / Mr / Mrs / Miss / Ms Other (please specify)	Forenames(s):	Surname:
Home address:		Correspondence address: (if different)
Home telephone:	E-mail address:	
Mobile number:	May we contact you by e-mail? Yes/No	
Work telephone:	Do you hold a current driving licence? Yes/No	
May we contact you at work? Yes/No		

Part B: Present or last employment			
Present or most recent employer, nature of business and address	Dates (month & year)		Position held and nature of duties
	From	To	
Current / most recent salary:			
Period of notice required / When could you commence duties if appointed?			



Part C: Work History

Give details of your previous work history beginning with the most recent post

Dates (from/to)	Name & address of employer	Position held	Summary of main duties	Grade & Salary

Please use additional sheet if required

Part D: Education and Training

Secondary Schools / Colleges	Dates		Qualifications obtained	Date	Grade
	From	To			

Further / Higher education establishment	Dates		Course Title	Results (including class of degree)
	From	To		

Professional training / qualifications, with dates and levels attained:

Other recent training / courses attended relevant to this post, with dates:

Part E: Supporting Statement

Please describe briefly how your skills and experience meet the requirements of the job description or provide an accompanying letter.

Part F: References

Please give details of two referees, one of whom should be your current or most recent employer:

Present or most recent employer

Name and Title:

Position held:

Telephone:

E-mail:

Address:

Post Code:

Other referee

Name and Title:

Position held:

Telephone:

E-mail:

Address:

Post Code:

May we approach your present employer for a reference before interview?

Yes

No

Part G: Declaration

- You are required to sign the declaration below certifying that all the information you have provided is accurate.
- The College may wish to check any of the details you have provided.
- Providing false or misleading information or deliberately concealing any relevant facts may disqualify you from appointment or, if appointed, may result in dismissal.

I declare that the information on this form is correct and I have omitted nothing that, to the best of my knowledge, might affect this application. I am not disqualified from working with children.

Signature:

Date:

When completed please return to:

Mr M T Clinton
Principal
Stockton Sixth Form College
Bishopton Road West
Stockton on Tees
TS19 0QD

This application form is available in other formats. Please contact the College for further details.

Please note that your application will not be acknowledged unless you include a stamped addressed envelope.

Only short listed candidates will be notified of the outcome of their applications; if you have not heard within four weeks of the closing date you should assume that your application has been unsuccessful on this occasion.

Stockton Sixth Form College

Supporting Student Success



Confidential

Equal Opportunities Monitoring Sheet

This section of the application will be detached from your application and will be used solely for monitoring purposes.

Stockton Sixth Form College recognises and actively promotes the benefits of a diverse workforce and is committed to treating all employees with dignity and respect regardless of race, gender, disability, age, sexual orientation, religion or belief. We therefore welcome applications from all sections of the community.

Vacancy for the post of:

Name:	Date of Birth:
Gender (please specify):	Nationality:

Ethnicity - Please indicate with X in the appropriate box					
11	White – British	<input type="checkbox"/>	12	White	<input type="checkbox"/>
19	Other White background	<input type="checkbox"/>	21	Black or Black British – Caribbean	<input type="checkbox"/>
22	Black or Black British – African	<input type="checkbox"/>	29	Other Black background	<input type="checkbox"/>
31	Asian or Asian British – Indian	<input type="checkbox"/>	32	Asian or Asian British – Pakistani	<input type="checkbox"/>
33	Asian or Asian British – Bangladeshi	<input type="checkbox"/>	34	Chinese	<input type="checkbox"/>
39	Other Asian background	<input type="checkbox"/>	41	Mixed – White and Black Caribbean	<input type="checkbox"/>
42	Mixed – White and Black African	<input type="checkbox"/>	43	Mixed – White and Asian	<input type="checkbox"/>
49	Other Mixed background	<input type="checkbox"/>	80	Other Ethnic background	<input type="checkbox"/>
90	Not known	<input type="checkbox"/>	98	Information refused	<input type="checkbox"/>

Disability: Do you consider yourself to be disabled? Yes / No		If yes, please indicate the nature of your disability:	
• Physical or sensory impairment	<input type="checkbox"/>	• Medical condition e.g. arthritis, MS, cancer	<input type="checkbox"/>
• Mental health difficulties e.g. depression	<input type="checkbox"/>	• Other (please specify)	<input type="checkbox"/>
• Specific learning difficulties e.g. dyslexia	<input type="checkbox"/>		
Please identify any special requirements or equipment, which may assist you			
(a) in the recruitment process:			
(b) to enable you to carry out the job:			

CRB Check: Have you had a recent CRB check? Yes / No	If Yes – Date:
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Job Advertisement: How did you find out about this job? Please specify the source of publication(s)
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Signature: Date:

This information is for Equal Opportunities monitoring purposes only and will not be used in the selection process. It will be processed in accordance with the Data Protection Act (1998) rules on sensitive personal data, under which Stockton Sixth Form College is registered.