



**Transforming Futures Trust**

**Head Office**

Unit 3, Ensign House  
Parkway Court  
Longbridge Road  
Plymouth  
PL6 8LR  
01752 396100

[TFTrecruitment@deltaservices.co.uk](mailto:TFTrecruitment@deltaservices.co.uk)

**Application for Staff Appointment**

|                   |  |
|-------------------|--|
| Name              |  |
| Post Applied for: |  |
| School Name/Base: |  |

**Our Trustee’s Promise to You**

**Fairness and Equality of Opportunity**

We do not operate an anonymous process, but we will treat your application fairly and honestly, and consider it only in relation to the requirements of the job. We will do this regardless of whether you currently work for Transforming Futures Trust, another employer, or are unemployed. Your application will be processed in strict confidence. Our aim is to appoint the best person for the job. We believe in equal opportunities and will not unfairly discriminate against anyone. Wherever possible and reasonable, we will help a person with disabilities with the application process. If you consider yourself to have a disability and need such help, please contact the school.

**Documentary Evidence**

In accordance with the Immigration, Asylum and Nationality Act 2006 it is a criminal offence to employ someone without entitlement or permission to work in the UK. The Act requires all employers in the UK to make basic document checks on every person before they start work to help ensure that they do not employ illegal workers. Shortlisted candidates will be required to bring original documentation to interview. Original academic and professional qualification certificates will also be required. \*Photocopies of documents will **not** be accepted. **The successful applicant will also be required to produce original documents to comply with an enhanced DBS check.**

**WARNING**

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

**Working for Transforming Futures Trust**

Some information about terms, conditions and benefits for employees is sent to shortlisted candidates. If you would like further information at this stage, please contact the School.

## Returning this Form

This must reach us by the closing date, late applications and incomplete applications will not be considered.

Please send completed form to the Recruitment Team by email ([TFTrecruitment@deltaservices.co.uk](mailto:TFTrecruitment@deltaservices.co.uk)) or by post using the address above for the attention of the Recruitment Team. Your application form must be returned in Microsoft Word format/version. Please note that a PDF (or equivalent) cannot be used due to formatting restrictions.

### 1. LETTER OF APPLICATION

Please write in support of your application (in no more than **700 words**), showing how your experience and qualifications are relevant, and how you would contribute to the post.

Please ensure your name and other personal details do not appear in this section, unless you need to continue on a separate sheet, this should then be referenced accordingly.

## 2 Current Employer

Please ensure that full employment history is provided from leaving full time education, providing months/years.

*The information in this section will be used to monitor if there are any gaps in employment – the information may also be used to initiate contact in regards to references. Please see section 4 in regards to consent to references taking place.*

|                                      |  |           |  |
|--------------------------------------|--|-----------|--|
| Name and Address of employer:        |  |           |  |
| Telephone number                     |  | Job Title |  |
| Dates from/to (mm/yy) of Appointment |  | Salary    |  |
| Notice Period                        |  |           |  |
| Reason for wishing to leave          |  |           |  |
| Brief outline of duties              |  |           |  |

## 3 Previous Employment.

*The information in this section will be used to monitor if there are any gaps in employment, please supply full addresses – the information may also be used to initiate contact in regards to references. Please see section 4 in regards to consent to references.*

| Employer/Voluntary Organisation | Post Held | Dates From/to (mm/yy) | Salary/Grade | Reason for Leaving |
|---------------------------------|-----------|-----------------------|--------------|--------------------|
|                                 |           |                       |              |                    |
|                                 |           |                       |              |                    |
|                                 |           |                       |              |                    |
|                                 |           |                       |              |                    |
|                                 |           |                       |              |                    |
|                                 |           |                       |              |                    |
|                                 |           |                       |              |                    |
|                                 |           |                       |              |                    |
|                                 |           |                       |              |                    |

Continue on a separate sheet if necessary

### Gaps in Employment History

*(Please provide details here of any unaccounted periods, we are required to ask this information as per Safer Recruitment guidelines in DFE Keeping Children Safe in Education Please ensure that there are no gaps in your employment history and ensure that all time periods have been accounted for since leaving full time education. **Any unexplained gaps could lead to not being shortlisted for interview.**)*

#### 4 REFERENCES

Employment references are required to cover the period of the **last five years**. School leavers should give their previous Headteacher. **School Professionals such as Teachers and TA's are to name the Headteacher as a reference contact.** Please provide enough details so the last five years of employment can be covered. If you have not provided enough information, we will contact you via the details given in Section 7 – Personal Details.

*The information here will be used to initiate contact regarding references for you if you are shortlisted for an interview. By completing this section, you are consenting that you are happy for us to contact the people below on your behalf. References will be obtained **before** interview, so that any issues of concern raised can be explored further with the referee, and taken up with the candidate at interview, unless otherwise indicated.*

| Employment Reference – Current Employer |                                 |                                | Employment Reference – Previous Employer |                                 |                                |
|---|---------------------------------|--------------------------------|--|---------------------------------|--------------------------------|
| Length of Employment:                   |                                 |                                | Length of Employment:                    |                                 |                                |
| Consent for Reference to be requested:  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> | Consent for Reference to be requested:   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| Can be contacted before interview:      | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> | Can be contacted before interview:       | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| Name of Manager or Headteacher          |                                 |                                | Name of Manager or Headteacher           |                                 |                                |
| Their Occupation                        |                                 |                                | Their Occupation                         |                                 |                                |
| Company Name                            |                                 |                                | Company Name                             |                                 |                                |
| Address                                 |                                 |                                | Address                                  |                                 |                                |
| Post Code                               |                                 |                                | Post Code                                |                                 |                                |
| Telephone No.                           |                                 |                                | Telephone No.                            |                                 |                                |
| Email Address                           |                                 |                                | Email Address                            |                                 |                                |

| Employment Reference – Previous Employer |                                 |                                | Character Reference                    |                                 |                                |
|--|---------------------------------|--------------------------------|--|---------------------------------|--------------------------------|
| Length of Employment:                    |                                 |                                | Length of time Known:                  |                                 |                                |
| Consent for Reference to be requested:   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> | Consent for Reference to be requested: | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| Can be contacted before interview:       | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> | Can be contacted before interview:     | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| Name of Manager or Headteacher           |                                 |                                | Name                                   |                                 |                                |
| Their Occupation                         |                                 |                                | Occupation                             |                                 |                                |
| Company Name                             |                                 |                                | Company Name                           |                                 |                                |
| Address                                  |                                 |                                | Address                                |                                 |                                |
| Post Code                                |                                 |                                | Post Code                              |                                 |                                |
| Telephone No.                            |                                 |                                | Telephone No.                          |                                 |                                |
| Email Address                            |                                 |                                | Email Address                          |                                 |                                |

## 5 EDUCATION AND PROFESSIONAL QUALIFICATIONS

*Information completed in this section will be used to cross reference certificates that you provide at interview. Checks of certificates is one of the conditions of an offer of employment should you be successful at interview.*

|   |  |  |
|---|--|--|
| 1 | School/College Attended  |  |
|   | Date from/To   |  |
|   | Qualifications (including A Level grades)                                    |  |
| 2 | Qualifications (e.g. Cert Ed / BA / BEd):                                    |  |
|   | Class of Degree  |  |
|   | University/College   |  |
|   | Date awarded   |  |
| 3 | Post graduate Qualifications (eg Med PGCE) Subject(s)                        |  |
|   | University/College   |  |
|   | Date Awarded   |  |
|   | Subjects   |  |
| 4 | Other Qualifications – please specify giving title / awarding body and date: |  |
|   |  |  |

## 6 MEMBERSHIP OF PROFESSIONAL/TECHNICAL BODIES

*Please provide details of any memberships held in regards to your profession.*

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

## 7 PERSONAL DETAILS:

Information from this application may be processed by computer for purposes registered by the Academy under the general data protection regulation. Individuals have the right of access to computerised personal data concerning them.

*The information completed here will be used to contact you once you have submitted your application form. By completing this section, you are consenting that you are happy for us to contact you using the details below as well as consent for us to contact your references.*

|    |   |                              |                             |  |
|----|---|------------------------------|-----------------------------|--|
| 1  | Surname:  |                              |                             |  |
| 2  | Forenames:  |                              |                             |  |
| 3  | Title:  |                              |                             |  |
| 4  | Address & Postcode  |                              |                             |  |
| 5  | Telephone Numbers:  |                              | Email Address               |  |
| 6  | Date of Birth:  |                              | NI Number                   |  |
| 7  | Do you hold a Full Driving License?   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |  |
| 8  | Do you have a Minibus driving License?  | Yes <input type="checkbox"/> | No <input type="checkbox"/> |  |
| 9  | Do you need permission to work in the UK?   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |  |
| 10 | Are you able to produce documents at interview which demonstrate that you are entitled to work in the UK? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |  |
| 11 | 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 with the school who knows he/she is related to any member of the school, a Governor of a school or a senior officer is required to disclose that relationship when submitting an application form. In educational establishment the designation '**senior officer**' includes Headteacher, Deputy Head and Heads of Department, member of the leadership and management group. 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:**

## 9 GDPR Reference Authorisation

I confirm that I give my full consent for my referees to disclose my personal information for employment references. **(Please tick box, sign and date)**

|        |  |      |  |
|--------|--|------|--|
| Signed |  | Date |  |
|--------|--|------|--|

## 10 REHABILITATION OF OFFENDERS

The post you are applying for is exempt from the Rehabilitation of Offenders Act 1974 and therefore, you are required to declare any convictions, cautions, reprimands and final warnings that are not protected (i.e. filtered out) as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 as amended in 2013. The amendments to the Exceptions Order 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 [www.gov.uk/government/publications/dbs-filtering-guidance/dbs-filtering-guide](http://www.gov.uk/government/publications/dbs-filtering-guidance/dbs-filtering-guide).

Having read the above paragraph, do you have and convictions or cautions to declare?

Yes

No

**If yes, please provide details:**

## 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. **(Please tick box)**

Signed

Date

**MONITORING FORM:  
PRIVATE AND CONFIDENTIAL**

|   |
|---|
| <p><b>Application Number:</b><br/><i>Office use</i></p> |
|---|

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

ACE 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 and Location Base                   |                                |                                |                                |                                 |
| 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                                      | <input type="checkbox"/> |          | Bangladeshi                               | <input type="checkbox"/> |
|          | Gypsy/Traveller                              | <input type="checkbox"/> |          | Indian                                    | <input type="checkbox"/> |
|          | Irish  | <input type="checkbox"/> |          | Pakistani                                 | <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                    | <input type="checkbox"/> |          | African                                   | <input type="checkbox"/> |
|          | White and Black African                      | <input type="checkbox"/> |          | Caribbean                                 | <input type="checkbox"/> |
|          | White and Asian                              | <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) |                          |          |   |                          |

**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? |                              |                             |  |
|   |                              |                             |  |



**Religion**

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

**Sexual Orientation**

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

**Marital status**

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