

 **Strathearn School**

**EMPLOYMENT**

**APPLICATION**

**FORM**

**EMPLOYMENT APPLICATION FORM**

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| A black background with red dots  Description automatically generated**Position Applied For** | **TEACHER OF BIOLOGY TO A LEVEL (maternity cover)** |
| **Closing Date & Time** | **FRIDAY 29 NOVEMBER 2024 - 12 NOON** |
| **Name of Applicant** |  |
| **Email address** |  |
| **Telephone number**  |  |

**1. PERSONAL INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Title |  | Surname |  |
| Forename |  | Middle Name |  |
| Address (including Postcode) |  |
| Email Address |  |
| Telephone number  |  | Date of Birth  |  |
| General Teaching Council Number |  | Teaching Reference Number |  |
| Do you have the right to work in the UK? | **YES/NO** |

**2. REHABILITATION OF OFFENDERS (NORTHERN IRELAND) ORDER 1978**

|  |  |
| --- | --- |
| Have you ever been convicted of a criminal offence? If yes, please provide details below: | **YES/NO** |
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**3. PROTECTION OF CHILDREN & VULNERABLE ADULTS (NORTHERN IRELAND) ORDER 2003**

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| --- | --- |
| Is there any reason why you would not be suitable to work with children or young people in an educational setting? If yes, please provide details below: | **YES/NO** |
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**4. DISABILITY DISCRIMINATION ACT 1998**

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| If you consider yourself to have a disability, please provide details of any reasonable adjustments in relation to communication, assistance or access that you may require if invited for interview: |
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**5.1 EDUCATIONAL & PROFESSIONAL QUALIFICATIONS**

|  |  |  |  |
| --- | --- | --- | --- |
| Date | Examination Level | Examination Subject / Examination Board  | Grade |
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**5.2 PROFESSIONAL MEMBERSHIPS**

|  |  |
| --- | --- |
| Name of Professional Body | Membership Grade or Level |
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**6. EMPLOYMENT HISTORY**

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| --- |
| **Current Employer** |
| Name & Address of Employer | Employment Dates To & From | Job Title & Main Duties & Responsibilities: | Notice Period & Reason for Leaving |
|  |  |  |  |
| **Previous Employment** |
| Name & Address of Employer | Employment Dates To & From | Job Title & Main Duties & Responsibilities: | Reason for Leaving |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Name & Address of Employer | Employment Dates To & From | Job Title & Main Duties & Responsibilities: | Reason for Leaving |
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| Aggregate teaching experience (in years) by 31st August 2024  |  |

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| Please provide an explanation for any gaps in your employment history since leaving full-time education |
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**7. EDUCATION & QUALIFICATIONS - *ESSENTIAL* ELIGIBILITY CRITERIA**

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| A teaching qualification recognised by the Department of Education for teaching in a post primary school. |
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| Honours degree in Biology or related subject (2.2 or above)  |
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| PGCE or equivalent in Biology or closely related subject |
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**7. EDUCATION & QUALIFICATIONS - *DESIRABLE* ELIGIBILITY CRITERIA**

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| --- |
| Honours Degree in Biology or closely related subject (2:1 or above). |
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**8. EXPERIENCE AND TRAINING –*ESSENTIAL* ELIGIBILITY CRITERIA**

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| Experience of teaching Biology in a post-primary school. |
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| Evidence of continuing professional development.  |
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**9. EXPERIENCE AND TRAINING –*DESIRABLE* ELIGIBILITY CRITERIA**

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| Experience of teaching Biology to GCSE and/or GCE level in a post-primary school. |
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| Experience of teaching Health and Social Care to AS/A2 level in a post-primary school |
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| Familiarity with CCEA GCSE, AS and A2 Biology specifications |
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**10. Knowledge, skills and personal qualities:**

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| **Essential**: Please refer to the Personnel Specification section on page 6 of the Job Description. |
|   |
| **Desirable**: Please refer to the Personnel Specification section on page 6 of the Job Description. |
|  |

**11+. OTHER INFORMATION**

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| Please provide any other information that you feel is relevant and specifically applies to this position as set out within the Job Description and Personal Specification. |
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**10. REFERENCES**

|  |  |
| --- | --- |
| Name of Referee |  |
| Job Title |  |
| Address including Postcode |  |
| Email Address |  |
| Telephone Number |  |
|  |
| Name of Referee |  |
| Job Title |  |
| Address including Postcode |  |
| Email Address |  |
| Telephone Number |  |

**11. DECLARATION**

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| **Representations and Undertakings** |
| **1.** | I have read all of the information pertaining to the position for which I am applying, and I declare that the information contained in this application form is true and accurate. |
| **2.** | I understand that the information on this application form is covered by the provisions of the General Data Protection Regulations and the Data Protection Act 2018 and is required by the School for the purpose of processing my application. I confirm that I have received a copy of the Privacy Notice for Teaching Staff prepared by the School and that I have read and understood said Privacy Notice. |
| **3.** | I understand and agree that: |
| **a.** | the provision of false information or the suppression of any material fact may result in disqualification from the recruitment process or, if appointed, in termination of employment; |
| **b.** | if I am unable to provide evidence of qualifications, suitable references, or the right to live and work in the United Kingdom, then any offer of employment may be rescinded or employment terminated; |
| **c.** | the direct or indirect canvassing of any governor, officer, employee or advisor of Strathearn School, Belfast in relation to this appointment will result in disqualification from the recruitment process; |
| **d.** | pursuant to the Rehabilitation of Offenders (Exceptions) Order (NI) 1979, this post is considered to be excepted from the Rehabilitation of Offenders (NI) Order 1978 and therefore any failure to disclose any convictions spent or otherwise will result in my disqualification from the recruitment process and non-appointment or, if appointed, in disciplinary action and potential dismissal; |
| **e.** | in the event of my application being successful, I understand that it will be necessary for checks to be made with Access NI to determine if there is any record of criminal convictions, pending prosecutions, cautions or bind-over against me, whether spent or otherwise or whether I am on the Barred List; |
| **f.** | I will inform the School of any change in my circumstances which may occur between the date of my application and any possible date of appointment; |
| **g.** | by completing this application form and declaration, I am indicating my authorisation for the School to approach my referees for a reference in the event of my being recommended for appointment; and |
| **h.** | I understand that any appointment made may be subject to the provision of satisfactory references and the successful completion of a probationary period.  |
| **Signature:** |  |
| **Date:** |  |

**Completed application forms and Equal Opportunities Monitoring form must be returned to:**

**Mrs Alison White at:** **awhite794@c2kni.net** **no later than the date and time specified on the cover page of this application.**