



# YSGOL EIRIAS APPLICATION FORM

## PERSONAL DETAILS

### APPLICANT TYPE

Internal Applicant / External Applicant

### PERSONAL DETAILS

Title:

Forename:

Forename 2:

Forename 3:

Surname:

National Insurance Number:

### ADDRESS DETAILS

House Name:

Number/Street:

Local Area:

POSTTOWN:

POSTCODE:

Address type:

Mailing address:

### CONTACT DETAILS

Please ensure that you enter at least one telephone number AND one email address in the contact details.

Email address:

Home telephone number:

Mobile telephone number:

## VACANCY DETAILS

The Equality Act 2010 defines a disabled person as a person that has a physical or mental impairment, which has a substantial and long term adverse effect on the person's ability to carry out normal day-to-day activities (ie has lasted or is expected to last at least 12 months)

Do you consider yourself to have a disability in accordance with the above act?

Do you wish for your application to be considered under the scheme?

Special facilities or adjustments required for the interview?

Special facilities or adjustments required for the role?

## Additional Information

Are you a UK National?

Are you subject to Immigration controls?  
(If yes, please state Visa reference number)

Do you require a work permit?  
(If yes, please state work permit number)

## DRIVING LICENCE INFORMATION

Do you have a valid driving licence?

Do you have access to transport for work duties, if required?

Licence categories:

Licence valid from date:

Licence valid end date:

## EDUCATION AND PROFESSIONAL QUALIFICATIONS

Please note that we will require proof of listed qualifications and memberships at interview and we may verify with awarding bodies.

Please include place of learning subjects and grades.

*Clearly state subjects and grades achieved on separate lines*

## **TRAINING, DEVELOPMENT AND MEMBERSHIPS**

*Please add events as necessary*

## **MEMBERSHIP OF PROFESSIONAL BODIES**

*Please state any Memberships that you currently have with any professional institutes. Please include professional body, membership number, level and expiry date of membership.*

## PRESENT/MOST RECENT EMPLOYMENT

*Please ensure all employment is listed with specific dates so that we can consider any eligibility for continuous service. We may contact any previous employer.*

*Please state the details of your full employment history starting with your current or the most recent first.*

*Please state any gaps in employment below. Please enter the start date of the gap and in the job details section explain the reason for the gap.*

Company name:

Job title:

House Name:

Number/Street:

Local Area:

POSTTOWN:

POSTCODE:

Salary:

Employment start date:

Employment end date:

Reason for leaving:

Job Details:

Company name:

Job title:

House Name:

Number/Street:

Local Area:

POSTTOWN:

POSTCODE:

Salary:

Employment start date:

Employment end date:

Reason for leaving:

Job Details:

**Current Employment Notice Period**

Notice period:

**FURTHER APPLICANT INFORMATION**

Use this section to describe how your skills, knowledge and experience meet the requirements of the role. It is essential to refer to the Person Specification and demonstrate evidence to cover each point (if it applies). This is the evidence that we will consider when shortlisting for interview.

Please include your CV in addition to the full completion of this form.

## WELSH LANGUAGE SKILLS

*Please provide details of your Welsh skill level*

Welsh listening and speaking:

Welsh Reading and Understanding:

Welsh writing:

## REFERENCES

### References

You are required to give the names and addresses to whom reference can be made in support of your application from your last two employers.

Relatives, Partners, Elected Members, or any Member of the School Governing Body MUST NOT be nominated as referees unless the recruitment is for a Headship post within school. To do so will disqualify the applicant for the appointment.

Character references will only be acceptable where the candidate has just left school or has not been employed in any capacity. Candidates must provide one referee from a senior member of staff from their school, college or university and the other should be a suitable character reference.

We reserve the right to contact any of the previous employers.

Referee name:

Referee job title:

House Name:

Number/Street:

Local Area:

POSTTOWN:

POSTCODE:



Referee contact type:

Referee contact number:

Referee email address:

Reference type:

Referee name:

Referee job title:

House Name:

Number/Street:

Local Area:

POSTTOWN:

POSTCODE:

Referee contact type:

Referee contact number:

Referee email address:

Reference type:

## **DECLARATION OF INTEREST**

If you are related or have close relationships to any Councillor, employee of the school or Conwy County Borough Council, please give details.

Please use a new line for each person

Details (Name, Position and relationship):

## **EQUALITY MONITORING**

Ysgol Eirias is committed to valuing diversity and promoting equality. It is important that no candidate receives less favourable treatment because of their race, ethnic or national origin, sex, gender identity, disability, sexual orientation, religion or belief, age, marital status or language.

### **Equality Monitoring**

Type of disability, if previously stated

If disability type is 'other', please specify

## DECLARATION

The information on this application form is true and complete. I understand that a Disclosure check may be sought through the Disclosure and Barring Service (DBS) and an Identity Check may be undertaken. I understand that, if I fail to provide correct information, this may result in an offer of appointment being withdrawn or in disciplinary action or dismissal at a later date. I understand that contacting Councillors or other Council employees to influence my application would disqualify me from appointment. I give my consent under GDPR to process and store information on this form.

The information on this form is covered by GDPR. This form may be printed for use during the recruitment procedure. The form will then be stored for least 6 months then destroyed. If you are appointed, this form will be used as part of your personal employee file.

We may use information from this form to prevent and detect fraud. We may also share this information with other organisations.

I confirm that the information I provide is true and complete:

Yes / No

Signature:

Print Name: