

HIGHER EDUCATION						
	Subject (e.g. history)	Name of institution (e.g. Manchester University)	Qualification awarded			
			Title (Bsc, BA)	Class	Division	Date
First degree						
Postgraduate degree (if applicable)						

TEACHING QUALIFICATION			
Title of qualification (e.g. PGCE)	Name of institution (e.g. Institute of Education, London University)	Main teaching subject (s)	Second teaching subject

SECONDARY SCHOOL EDUCATION		
Name of school (s)	From	To
Post-16 qualifications, with grades (e.g. A level chemistry grade B):		

OTHER QUALIFICATIONS OBTAINED		
Course and awarding body	Date	Qualification

PERIODS NOT ACCOUNTED FOR IN PREVIOUS SECTIONS SINCE AGE 18 YEARS (Please give details)	From			To		
	D	M	Y	D	M	Y

IN-SERVICE TRAINING	
Please give details of courses relevant to this post, attended within the last three years	Date

REFERENCES

Please give the names, addresses and status of two referees who may be approached now. If you are currently employed as a teacher, one referee should normally be your present Headteacher.

1.	Name:	Status:
	Address:	Telephone:
		Fax:
		E-Mail:
2.	Name:	Status:
	Address:	Telephone:
		Fax:
		E-Mail:

If you are known to the referees by another name (e.g. previous name) please inform them of your present name and advise that we may be in contact

Criminal Convictions
 The post for which you have applied is exempt from the provisions of the Rehabilitation of Offenders Act 1974 (Exceptions) (Amendments) Order 1986. If you are short listed for this post, you will be required to disclose details of any criminal convictions, cautions or bind-overs on a separate form.

Please note that an application will not be considered further if the candidate declines to complete the Criminal Records Bureau disclosure form and search application request.

Health
 If you are successful in this application your appointment to this post will be subject to medical clearance.

From what source did you learn of this vacancy?

I hereby declare that the information given above and overleaf is correct to the best of my knowledge

SIGNATURE:

DATE:

ADDITIONAL INFORMATION (For Salary and Pension purposes)

National Insurance Number:												Previous name (if any)
DfES Number:												Registered Disabled Person's Number: (If applicable)
Date of Recognition*:												
<p>* If this would be your first teaching appointment, please attach a copy of your letter from the DfES granting you Qualified Teacher Status unless you qualified by virtue of Cert. Ed., B.Ed., or P.G.C.E. (not F.E.) gained in England and Wales</p>												

CURRENT (OR MOST RECENT) SALARY

Main Scale salary: p.a.	£	Upper Pay Spine point (if applicable): p.a.	£
Teaching & Learning Responsibility p.a. payment (if applicable)	£	Leadership Spine point (if applicable): p.a.	£
Other allowances (state which allowance): p.a.	£	Inner/Fringe London allowance (if applicable): p.a.	£

PENSIONS

* a) Are you currently in receipt of a pension from the DfES ?

Yes / No

* b) Have you elected to opt out of the Teachers' Superannuation Scheme?

Yes / No

* c) Have you elected to participate in the Part-time Teachers' Superannuation Scheme?

Yes / No

* d) Have you elected to pay additional Superannuation Contributions through the teachers' scheme?

Yes / No

If so please indicate whether these are:

* i) Widower's Contributions YES / NO _____%

* ii) Purchase of Past Added Years YES / NO _____ %

* iii) Additional Voluntary Contributions via Prudential Assurance Co. YES / NO _____ %

* Please attach a copy of the DfES notification as appropriate)