

APPLICATION FORM

Position Applied for:

For School Office use only – Application Information
Application All Refs Interview Start
Received Received Date Date

Head Teacher: Mr Charles I Finlay Street, Sheffield, S3 7PS I Tel: 0114 272 6994 I office@bethanyschoolsheffield.org I www.bethanyschoolsheffield.org

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Title: Mr/Mrs/Miss/Ms Former Name/s Male or Female		First Name(s) Used from Date of Birth	to
Address			
	_ Post Code	Telephone:	
Telephone Mobile:		Email:	
N.I Number		Teacher Reference Number	
Do you have Qualified Teach	ner Status? Yes □	No □	
Have you completed your NO	QT statutory induct	ion year? Yes □ No □	
Date Free to Take up Appoin	tment		

Health Record/Disability

PLEASE COMPLETE THE ATTACHED HEALTH DECLARATION FORM AND RETURN IT WITH YOUR APPLICATION FORM.

Do you have, or have you had, any disability /medical conditions that might affect your performance in undertaking the post being applied for? If yes please provide further details of your condition/disability and any reasonable adjustments that you feel should be made, to the recruitment process or to the job its self, to assist applicants.

Disability Definition: Individuals who were registered under the Disabled Persons (Employment) Act 1944 on both 12 January 1995 and 2 December 1996 are treated as being disabled under the Disability Discrimination Act 1995 (DDA). The DDA states "a person has a disability if he has a physical or mental impairment which has a substantial and long-term adverse effect on his ability to carry out normal day to day activities." The person must satisfy the four criteria in bold in the above statement to fall under and, therefore, be protected under the DDA. This definition is subject to amendments made by the DDA 2005.

Right to work in the UK

Under Section 8 of the Asylum and Immigration Act 1996, it is a criminal offence to employ an individual who does not have permission to work in the UK. Therefore, all offers of employment are made subject to the production of documentary evidence of such permission, e.g. Passport or other Home Office authorised documentation.

Are you able to provide such documentary evidence? Yes ☐ No☐ Nationality______

Country 1:			Cour	ntry 2:		
Overseas address:			_ Ove	rseas add	ress:	
Post Code: _			- - -	Post C	ode:	
Period from:	to:		Per	iod from: _	to:	
Education (Secor	ndary and Above	e) . Continue or	n separa	te sheet i	f necessary.	
School/College Na	me		D	ate From	Date to	
Qualifications (A'	Levels and abo	ve)/Skills trair	ning. Co	ntinue on	separate sheet if necessary	<i>/</i> .
Qualification Title/	Awarding Body		G	rade	Year	
	y/employment/Vo	luntary work, ir	ncluding	periods of	condary Education. of unemployment) Please no	te
Company/ Organisation	Position		From	То	Reason for leaving	

Have you ever worked / lived overseas (outside of the UK)? If YES please complete section below.

Statement in support of your application. experience qualify you for this position?	How do your personal qualities and professional

Personal Experience of Church Life

The job description has a 'Genuine Occupational Requirement' for the position to be filled boracticing Christian. Please tell us a little of your personal experience of your Christian / Church life						
Personal Interests						
Poforonco Addroscos: (references	cannot be acconted from relatives or friend	de Deferees will be contacted if you ar				
	cannot be accepted from relatives or friend	•				
	ualifications and to note any disciplinary o	ffences relating to children or Child				
Protection concerns.)						
Pastoral reference from church eader	Most recent employment reference	Employment reference				
Title:	Title:	Title:				
lame:	Name:	Name:				
Church:	Organisation:	Organisation:				
Address:	Address:	Address:				
Postcode:	Postcode:	Postcode:				
Гel:	Tel:	Tel:				
Email	Email:	Email:				
How did you hear about the \	Vacancy?					
Advertisement through a church	Which church	?				
Christian vacancies web site	Which website	e?				
Christian event	Which event?					
Christian Schools Trust □						
Other please state:						
Are you related to any present emplo	yee / Governor of the School? □					
f ves please give details						

Information

This post carries a **Genuine Occupational Requirement** to be a Christian as defined under the Equality Act 2010, Schedule 9 (3), noting exemptions in the School Standards & Framework Act 1998.

Bethany School is designated as a 'School of Religious Character' by the D.f.E. Statutory Instrument 2003, No. 3328, and as such advertises for Christian teachers in line with its own ethos.

The school's policy is to recruit committed Christian teachers who are able to agree to its **Statement of Faith**, as stated below

Statement of Faith

The doctrinal basis of faith of the Company shall be the fundamental truths of Christianity including:

- the divine inspiration, inerrancy and infallibility of Holy Scripture as contained in the sixty-six books of the Old and New Testaments and as originally given, and in its supreme authority in all matters of faith and conduct;
- the unity of the Father, the Son and the Holy Spirit in the Godhead, and the sovereignty of God in creation, providence and redemption;
- the creation of man in the image of God and the universal sinfulness and guilt of human nature since the Fall, rendering man subject to God's wrath and condemnation;
- the Lord Jesus Christ as true God and true man, His deity, incarnation, virgin birth, sinless life, atoning death, and physical resurrection, and the only true head of the universal church of all believers;
- redemption from the guilt, penalty and power of sin only through the shed blood and sacrificial death (as our representative and substitute) of Jesus Christ;
- the necessity of the work of the Holy Spirit to make the death of Christ effective to the individual sinner, granting him repentance towards God and faith in Jesus Christ, and the indwelling and work of the Holy Spirit in all believers:
- the expectation of the personal return of the Lord Jesus Christ.

Please indicate your agreement with this statement by ticking the box.

Safeguarding

Bethany School is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment and undergo appropriate checks.

- The successful applicant will be subject to relevant and required to provide a CRB (DBS) disclosure at an Enhanced level.
- The school will seek references for short-listed candidates and may approach previous employers/ educational establishments for information to verify particular experience and qualifications before, during or after the interview.
- If you are currently working with children, in a paid or voluntary capacity, your employer will be asked
 about disciplinary offences relating to children, including any for which the penalty time is expired
 and whether you have been subject to any child protection concerns and if so, the outcome of any
 enquiry or disciplinary procedure. If you are not currently working with children but have done so in
 the past, that previous employer will be asked about those issues.
- Providing false information is an offence and could result in the application being rejected or summary dismissal if you have been selected and possible referral to the police.

Data Protection Statement

The information that you provide on this form and that obtained from other relevant sources will be used to process your application for employment. The personal information that you give us will also be used in a confidential manner to help us monitor our recruitment process.

If you succeed in your application and take up employment with us, the information will be used in the administration of your employment with us. We may also use the information if there is a complaint or legal challenge relevant to this recruitment process.

We may check the information collected, with third parties or with any other information held by us. We may also use or pass to third parties, information to prevent or detect crime, to protect public funds, or in other ways as permitted by law.

By signing this application form we will be assuming that you agree to the processing of sensitive personal data (as described above), in accordance with our registration with the Information Commissioner's Office.

Declaration

I acknowledge that Bethany School is committed to safeguarding and promoting the welfare of children and young people and to this end hereby certify that I am not on List 99, disqualified from work with children, or subject to sanctions imposed by a regulatory body such as GTC, and have no convictions, cautions or bind-overs (or have attached details of my record in a sealed envelope marked confidential).

I consent to a criminal records check if appointed to the position for which I have applied. I am aware that details of pending prosecutions, previous convictions, cautions, or bindovers against me will be disclosed along with any other relevant information which may be known to the police, and Lists held in accordance with the Safeguarding Vulnerable Groups Act 2006.]

I agree to inform Bethany School

- if I am convicted of an offence after I take up any post within Bethany School, Sheffield. I understand that failure to do so may lead to the immediate suspension of my work with children or vulnerable adults and/or the termination of my employment.
- if I become the subject of a police and/or a social services/(Children's Social care or Adult Social Services)/social work department investigation. I understand that failure to do so may lead to the immediate suspension of my work with children or vulnerable adults and/or the termination of my employment.

I declare to the best of my knowledge and belief, all particulars I have given in all parts of this application form are complete and true and can be treated as part of any subsequent contract of employment. I understand that any false declaration or misleading statement or a significant omission may disqualify me from employment and render me liable to dismissal. I understand that any job offer is subject to references, checks on relevant qualifications, employment eligibility and criminal convictions, all of which must be deemed by Bethany School, Sheffield as satisfactory. I also declare that I will not contact any member of Bethany School, Sheffield to further this application (and I understand that to do so would disqualify me from further consideration) - unless the advertisement invites me to contact a named individual to seek further details.

Please return this application form and the documents listed below to:

David Charles, Bethany School, Finlay St, Sheffield, S3 7PS David.charles@bethanyschoolsheffield.org

Please enclose with your application:	Tick	
Your Health Declaration Form		
Copy of DBS certificate/or DBS number (if you have one)		
Photocopies of all relevant qualifications (originals will be required on the day of		
interview if shortlisted)		
Photocopy of Proof of identity (e.g. passport/driving license)		
If not a British Citizen, proof of your right to work in the UK		
The attached Self Declaration Form (pages 7 – 9) in a separate envelope		

Self Declaration Form

for a position requiring an enhanced disclosure.

Yes □

This Post is exempt from the Rehabilitation Of Offenders Act 1974 and therefore all convictions, cautions and bind-overs, including those regarded as 'spent' must be declared.

STRICTLY CONFIDENTIAL

As an organisation we undertake to meet the requirements of the Data Protection Act 1998 and all other relevant Legislation, and the expectations of the Information Commissioners Office relating to the data privacy of individuals.

All applicants are asked to complete this form and return, to the Recruiter detailed below, in a separate sealed envelope to: Sarah Walker (Recruiter responsible for DBS checks) **Bethany School** Finlay Street Sheffield S3 7PS Appointment applied for: Have you ever been charged with, cautioned or convicted in relation to any criminal offence; or are you at present the subject of a criminal investigations/pending prosecution? Yes □ **No** □ (please tick) If yes, please give details including the nature of the offences and the dates. Please give details of the court(s) where your conviction (s) were heard, the type of offence and sentence(s) received. Could you also give details of the reasons and circumstances that led to the offence(s)? Continue on a separate sheet if necessary. **Police Investigations** This should include relevant police non-conviction information. Please complete this section if the post you are applying for requires an Enhanced Disclosure check. Have you ever been the subject of a police investigation that didn't lead to a criminal conviction? Yes □ No □ (please tick) If yes, please give details below, including the date of the investigation, the Police Force involved. details of the investigation and the reason for this, and disposal(s) if known. To your knowledge have you ever had any allegation made against you, which has been reported to,

and investigated by, Social Services/Social Work Department (Children's or Adult Social Care)?

No (please tick) If yes, please provide details, we will need to discuss this with you.

Has there ever been any cause for concern regarding your conduct with children, young people, vulnerable adults? Please include any disciplinary action taken by an employer in relation to your behaviour with adults.							
Yes □ No □ (please tick) If yes, please give details.							
Declaration							
To help us ensure that we are complying with all relevant safeguarding legislation, please read the accompanying notes and complete the following declaration.							
(full name)							
of (address)							
consent to a criminal records check if appointed to the position for which I have applied. I am aware that details opending prosecutions, previous convictions, cautions, or bindovers against me will be disclosed along with any othe elevant information which may be known to the police.							
agree to inform the person within the organisation responsible for processing disclosure applications if I am convicted of an offence after I take up any post within the organisation. I understand that failure to do so may lead to the immediate suspension of my work with children or vulnerable adults and/or the termination of my employment.							
agree to inform the person within the organisation responsible for processing disclosure applications if I become the subject of a police and/or a social services/ (Children's Social care or Adult Social Services)/Social Work Department envestigation. I understand that failure to do so may lead to the immediate suspension of my work with children or rulnerable adults and/or the termination of my employment.							
Signed: Date:							
Those applying for work with children and/or vulnerable adults in positions which fall within the scope of egulated activity please confirm that you are not barred from working with children/vulnerable adults.							
confirm that I am not barred from working with children/vulnerable adults.							
Signed: Date:							

Legalese - notes

The Disclosure of any offence may not prohibit employment. Please refer to our Rehabilitation of Offenders Policy. As this post involves substantial, unsupervised contact with children, young people and/or vulnerable adults all applicants who are offered an appointment will be asked to submit to a criminal records check before the position can be confirmed. You will be asked to apply for an Enhanced Disclosure through the Disclosure and Barring Service (DBS) (England & Wales), SCRO (Scotland), ACCESS NI (Northern Ireland).

As the position is exempted under the Rehabilitation of Offenders Act this check will reveal any details of cautions, reprimands or final warnings, as well as formal convictions. Because of the nature of the work for which you are applying, this position is exempt From the provision of section 4(ii) of the Rehabilitation of Offenders Act 1974 (Exemptions Orders as applicable within the UK), and you are not entitled to withhold information about convictions which for other purposes are 'spent' under the provisions of the Act. You must therefore declare all convictions whenever they occurred. In the event of appointment, any failure to disclose such convictions could result in the withdrawal of approval to work with children or vulnerable adults within the church/organisation. This process is subject to a strict code to ensure confidentiality, fair practice and security of any information disclosed. The DBS/SCRO/PVA (NI) Service Code of Practice and our own procedures are available on request for you to read. It is stressed that a criminal record will not necessarily be a bar to appointment, only if the nature of any matters revealed could be considered to place children or vulnerable adults at risk. As a place of worship/organisation we agree to abide by the Code of Practice on the use of personal data in employee/employer relationships under the Data Protection Act 1998 as well as the expectations of the DBS/SCRO/ACCESS NI Service.

As a condition of employment we ask that you keep us informed of any other work (either paid or voluntary) which you are undertaking which involved working with children or vulnerable adults. Should ever we need to refer an individual to any of the lists of people deemed unsuitable for working with children or vulnerable adults then we would also inform them of any knowledge we have of that individual working in any other capacity with children/vulnerable adults. * delete where appropriate

Notes for England, Wales & Northern Ireland Only - Children and Young People

Under the Protection of Freedoms Act 2012 it is an offence for any organisation to offer employment to anyone who has been convicted of certain specific offences, or included on either of the two barred lists held by the Disclosure and Barring Service. Where the post falls within the scope of regulated activity (as defined by the DBS, under the Safeguarding Vulnerable Groups Act 2006 and the Protection of Freedoms Act 2012) an enhanced with barred list check will be completed. Those working with children and / or vulnerable adults in posts which fall outside the scope of regulated activity may still be eligible for an enhanced disclosure WITHOUT a barred list check.

The DBS was established under the Protection of Freedoms Act 2012 and merges the functions previously carried out by the Disclosure and Barring Service (DBS) and Independent Safeguarding Authority (ISA). The DBS came into existence on 1December 2012. The DBS offers both an enhanced check and for those engaged in regulated activity an enhanced with a barred list check.

DBS Eligibility from: http://www.homeoffice.gov.uk/publications/agencies-public-bodies/dbs-checking-service-guidance/eligibility-guidance

Bethany School DECLARATION OF HEALTH MEDICAL QUESTIONNAIRE Notes for Guidance

PLEASE RETURN WITH YOUR APPLICATION FORM

The assessment of your suitability to work at Bethany School is a statutory entry requirement for all new staff, regardless of the post being applied for. Bethany school has a responsibility to ensure that new employees have the health and physical capacity to undertake their role and will not put children, young people, other staff or themselves at risk of harm.

It is recognised that people with disabilities or chronic illnesses may have the capacity to complete the roles within the school and make a very valuable contribution to the school and so another purpose of this assessment is to inform Bethany School of the personal needs of prospective employees, so that reasonable adjustments can be made where possible if they are successful.

Therefore, the purpose of the enclosed questionnaire is to provide the necessary information so that the school can assess:

- if applicants have the health and physical capacity to complete the role, and
- if applicants will require reasonable adjustments to be able to complete the role.

As the form indicates, it may be necessary in exceptional cases to ask candidates to undergo a medical examination. Medical advisers will, in these cases, give the applicant and the school advice about the implications of any health problems in relation to a teaching career.

PLEASE READ THE FOLLOWING NOTES CAREFULLY

- 1. The attached questionnaire is intended to remove the need for further medical reports for applicants applying for a role at Bethany School except in a minority of cases.
- 2. **All candidates must complete the questionnaire in full**. Section 1 asks for general information about candidates. Section 2 relates to specific health matters. The questions in this section should be answered by circling 'Yes' or 'No'. If you answer yes please give further details, including any relevant dates, in the right hand column.
- 3. All candidates must sign the statement of consent and declaration in Section 3.
- 4. If a full medical examination or specialist consultation and report are required, the candidate is responsible for meeting any cost incurred.
- 5. Candidates should declare any physical or mental health condition. The recruitment panel will determine whether the condition(s) affect the candidate's ability to carry out the advertised role safely. This means any condition that might affect their judgement or performance in a way that may pose a risk to others.
- 6. Failure to declare any details, which are subsequently discovered to be relevant for assessing your 'fitness for the role' may lead to termination of employment.
- 7. Candidates are advised to enclose relevant supporting medical evidence with the questionnaire; this will facilitate the recruitment panel's decision. Examples might include a psychologist's or teacher's report in the case of a Specific Learning Difficulty such as dyslexia.

DECLARATION OF HEALTH

Confidential

SECTION 1: GENERAL INFORMATION

Personal Details						
Surname/Family Name						
Forename(s)						
Title (Mr/Mrs/Miss/Ms)	Date of Birth (dd/mm/yy)					
Home Address			-			
(including Postcode)						
Home Tel No.			Mobile			
Email						
Please tick here to	Letter to	Email		Telephone		
confirm that you are	home					
happy to be contacted	address					
by:						
Post applied for:						
Oan and Descrition on Datai	1-					
General Practitioner Detai	1					
GP Name	Dr					
Address						
(including Postcode)						
Tel No.						
Terrio.						
What is your height?	ft	ins	Or	metres		
What is your weight?	st	lbs	Or	Kgs		
What is your worght.	1 01	100	01	i i i i i i i i i i i i i i i i i i i		
Previous job role?						
How much time have you	lost from work or					
study due to illness in the						
What were the reasons for						
	<u>.</u>					
SECTION 2						
Please answer all of the further details	following questions	by circling '	Yes' or 'N	lo'. If you answer yes, please give		
1 Have you ever had a	ny illness or medical	Yes N	o Detai	ls:		
problem that may cu	rrently affect your					
ability to work safely						
role?						
(Please include dates	s)					

2	Have you been treated in hospital within the last 5 years? (Please include dates)	Yes	No	Details:
3	Have you seen a doctor in the last year for any kind of health problem? (Please include dates)	Yes	No	Details:
4	Are you having any treatment or investigations of any kind at the moment?	Yes	No	Details:
5	Are you waiting for any treatment, operation or investigation or had any in the past? (Please include dates)	Yes	No	Details:
6	Do you have any visual impairment not corrected with glasses or contact lenses?	Yes	No	Details:
7	Do you have any hearing impairment?	Yes	No	Details:
8	Do you have any speech or communication impairment?	Yes	No	Details:
9	Have you been diagnosed with a learning difficulty such as dyslexia?	Yes	No	Details:
10	Have you been diagnosed with a developmental disorder such as autism or Asperger syndrome?	Yes	No	Details:
11	Have you ever had back problems? (Please include dates)	Yes	No	Details:
12	Have you ever had any problem with your joints including pain, swelling or stiffness? (Please include dates)	Yes	No	Details:

13	Have you ever suffered from any mental illness, psychological or psychiatric problem, including depression, anxiety, nervous debility, nervous breakdown, schizophrenia, or eating disorder (anorexia or bulimia)? (Please include dates)	Yes	No	Details:
14	Have you ever had a drug or alcohol problem? (Please include dates)	Yes	No	Details:
15	Have you ever had fits, blackouts or epilepsy? (Please include dates)	Yes	No	Details:
16	Have you ever had any skin problems? (Please include dates)	Yes	No	Details:
17	Have you ever had any heart, blood pressure or circulatory problems? (Please include dates)	Yes	No	Details:
18	Have you ever suffered from asthma, bronchitis or other respiratory problems? (Please include dates)	Yes	No	Details:
19	In the last 12 months have you had a cough for more than 3 weeks, coughed up blood or had any unexplained weight loss or fever? (Please include dates)	Yes	No	Details:
20	Have you ever had hepatitis or jaundice? (Please include dates)	Yes	No	Details:
21	Do you have any other medical conditions?	Yes	No	Details:
22	Are you on any medication at present?	Yes	No	Details:
23	Are you allergic to anything? If so what? If you need to carry medication for this please specify	Yes	No	Details:

24	Do you need or would it assist you to have	Yes	No	Details:
	any special provision made to enable you			
	to fulfil your employment?			

SECTION 3

Statement of Consent and Declaration

You are asked to consent to personal information about your health/medical needs being shared with other members of the senior leadership team and board of governors when it is appropriate to do so.

The information you give in your declaration of health form and that given by your GP if applicable will be used to make a decision about your fitness for the advertised role and also to assess whether any additional support will be required from the school during your employment. We may also request further information from your GP/hospital specialists. Therefore, we need your consent to fulfil the requirement to assess you.

PLEASE RETURN WITH YOUR APPLICATION FORM

Please tick the following boxes to confirm your consent:		
١	es No	
I give consent for you to approach my family doctor and, if necessary, my hospital specialists for further information		
I give my consent for information about my health to be shared with relevant Senior leadership team members and governors in order to assess my fitness for the advertised role and to help me receive appropriate support from the school.		
Please read the declaration below and then sign and date the form:		
 I declare that the information I have given is complete to the best of my knowledge. 	rue and	
 I understand that failure to disclose information or giving false information may result in termination of my employment. I understand that I may be responsible for the expenses of any medical examination or report that may be required. 		
Signed:		
Defend on a constant		
Print name:		
Date of Signature:		

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