

## APPLICATION FOR EMPLOYMENT WITH THE TARKA LEARNING PARTNERSHIP

Please fill in the application form below (we do not accept CVs).

Any answers you provide are given with your consent. If you would like Tarka Learning Partnership to stop processing your data at any stage, you can get in touch with us at [admin@tarkatrust.org.uk](mailto:admin@tarkatrust.org.uk) or 01271 443120 to withdraw your consent. Please refer to our privacy notice for job applicants, available on our website, which explains what information we collect about job applicants and how/why we use it. You can find out more about your data rights on our website at <https://tarkatrust.org.uk/about/gdpr/>.

Please remember to check the form carefully, as once it has been submitted it cannot be changed. **Please note that questions marked with an asterisk \* are mandatory and therefore must be answered.**

Details entered in this part of the form will be held by Tarka Learning Partnership. Access to this information will be withheld from the shortlisting panel.

Job Title	
School/Department	

### Personal Details

Title	
*Surname/Family Name	
*First Name	
Middle Name	
*Name in which you are registered with a professional body (if applicable)	
Previous name (if applicable)	
DfE Registration No. (if applicable)	
*Address	
*Postcode/ Zip code	
*Country	

Home Telephone	
Mobile Telephone	
Work Telephone	
Preferred telephone number	<input type="checkbox"/> Home <input type="checkbox"/> Mobile <input type="checkbox"/> Work
* Email Address	
*Are you a United Kingdom (UK) National and have the right to work in the UK?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
If you have answered 'no' above, you must answer these questions:	
Please select the category that relates to your current immigration status. This status will be subject to checking before interview.	
<input type="checkbox"/> Highly Skilled Migrant Programme/Tier 1 <input type="checkbox"/> Indefinite Leave to remain/enter (Settled status) <input type="checkbox"/> Work Permit/Tier 2 <input type="checkbox"/> Dependant / Spouse visa <input type="checkbox"/> Clinical attachment visa <input type="checkbox"/> Tier 4 student <input type="checkbox"/> Visitor <input type="checkbox"/> Post Graduate Doctors and Dentists <input type="checkbox"/> Tier 5 Temporary Workers <input type="checkbox"/> Tier 5 Youth Mobility / Working holiday visa <input type="checkbox"/> Refugee <input type="checkbox"/> Other, please specify below  <p>-----</p>	
Please supply details of any visa currently held:	
Visa No: Start Date: (DD/MM/YY) Expiry Date: (DD/MM/YY) Details of any Restriction:	
Does your visa have a condition restricting employment or occupation in the UK?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

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## Safer Recruitment – On-line searches

In accordance with paragraph 220 of Keeping Children Safe in Education 2022, schools should carry out on-line searches to identify any incidents or issues that have happened, or are publicly available on-line.

Checks will not be carried out by the appointing officer.

Only relevant information relating to safeguarding or reputational concerns will be highlighted to the appointing officer. Any matters of interest will be considered with you to establish your suitability for the role for which you have applied.

Please help us to fulfil this duty by providing the relevant information of your public on-line profiles below.

<b>Platform</b>	<b>Personal Identification (username/handle)</b>	<b>Link to profile</b>
<i>e.g. Facebook</i>	<i>John Smith</i>	<i>www.facebook.com/userjohnsmith123456</i>
Facebook		
Twitter		
Instagram		
YouTube		
LinkedIn		
Tik Tok		
Other (insert details)		

## Relationships

If you are related to a Director, Trustee or have a personal relationship with a director or any employee of the Trust, please state the name and job title of the individuals and your relationship:

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## DECLARATIONS

\*Do you have any unspent criminal convictions, cautions, reprimands, bind-overs or final warnings, whether in the United Kingdom or in another country? These should exclude those defined as “protected” by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (and subsequent amendments). For more guidance, please visit [www.gov.uk](http://www.gov.uk)

Yes    No

If Yes, please provide details:

\* Do you have any spent adult cautions (simple or conditional) or spent convictions that are not “protected” as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended)? For more guidance, please visit [www.gov.uk](http://www.gov.uk)

Yes    No

If Yes, please provide details:

\* Are you included in any list of people barred from working with children by the Disclosure and Barring Service (DBS), the TRA (Teaching Regulation Agency) or any other organisations?

Yes    No

\* Have you ever lived or worked outside of the UK for more than six months in the last five years?

Yes    No

If Yes, please provide details:

\* Have you ever been subject to any disciplinary action in your current or previous positions, or had any allegations made against you?

Yes    No

If Yes, please provide details:

The Tarka Learning Partnership, has an absolute commitment  
to safeguarding and promoting the welfare of children



## Membership of Professional Bodies

Please provide details regarding any relevant professional registrations or memberships. This information will be subject to a satisfactory check.

* Please indicate your UK Professional Registration status *
<input type="checkbox"/> Not required for this post <input type="checkbox"/> I am a student/trainee Teacher <input type="checkbox"/> I am a qualified Teacher and hold Qualified Teacher Status or Qualified Teacher Learning and Skills Status (QTLS) <input type="checkbox"/> I have current UK professional registration relevant to this post (for example ACCA) <input type="checkbox"/> I am a student

If professional registration is not required then go to **Employment History**.

If you have answered 'I am a qualified Teacher', 'I am a student/trainee Teacher' or 'I have current UK professional registration relevant for this post' then please enter the relevant details below.			
Professional Body	Membership or Registration type	Membership/Registration Number	Expiry/Renewal Date

If you are applying for a post that requires professional registration you are required to provide the following information:

Are you currently the subject of a serious misconduct investigation or proceedings by a licensing or regulatory body in the UK or in any other country? (i.e. TRA)	<input type="checkbox"/> Yes <input type="checkbox"/> No
If applicable, please provide details of any investigations or proceedings you may be subject to.	
Have you been removed from the register or have conditions been made on your registration by a professional misconduct panel/committee or the licensing or regulatory body in the UK or in any other country?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If applicable, please provide details of any conditions you may have.	

## Employment History

Please record below the details of your full employment history beginning with your current or most recent first. If required, please provide additional information regarding your employment history within the 'Supporting Information' section.

Start of continuous school service (if applicable) (DD/MM/YYYY) <i>If appointed you will need to provide evidence of this before employment can be confirmed</i>	
Months since most recent employment ended (if applicable)	

### Current/most recent employer

Employer Name			
Address			
Type of Business		Telephone	
Job Title			
If a school, no. of pupils on roll		Age range of pupils	
Start Date (MM/YYYY)		End Date (MM/YYYY)	
Grade		Salary	
Reporting to (job title)		Period of notice	
Reason for leaving (if applicable)			
Brief description of your duties and responsibilities			

**Previous Employer 1**

Employer Name			
Address			
Type of Business		Telephone	
If a school, no. of pupils on roll		Age range of pupils	
Job Title			
Start Date (MM/YYYY)		End Date (MM/YYYY)	
Grade		Salary	
Reporting to (job title)		Period of notice	
Reason for leaving (if applicable)			
Brief description of your duties and responsibilities			

**Previous Employer 2**

Employer Name			
Address			
Type of Business		Telephone	
If a school, no. of pupils on roll		Age range of pupils	
Job Title			
Start Date (MM/YYYY)		End Date (MM/YYYY)	
Grade		Salary	
Reporting to (job title)		Period of notice	
Reason for leaving (if applicable)			
Brief description of your duties and responsibilities			



**Previous Employer 3**

Employer Name			
Address			
Type of Business		Telephone	
If a school, no. of pupils on roll		Age range of pupils	
Job Title			
Start Date (MM/YYYY)		End Date (MM/YYYY)	
Grade		Salary	
Reporting to (job title)		Period of notice	
Reason for leaving (if applicable)			
Brief description of your duties and responsibilities			

**Previous Employer 4**

Employer Name			
Address			
Type of Business		Telephone	
Job Title			
If a school, no. on roll			
Start Date (MM/YYYY)		End Date (MM/YYYY)	
Grade		Salary	
Reporting to (job title)		Period of notice	
Reason for leaving (if applicable)			
Brief description of your duties and responsibilities			

**Please add additional employers/information on a separate sheet.**

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## Employment Gaps

If you have any gaps within your employment history, please give full details below and state the reasons for the gaps.

## Supporting Information

In this section please give your reasons for applying for this post and additional information which demonstrates that you have read the published person specification and how you meet the essential and (where relevant) desirable criteria for this particular position. This can include relevant skills, knowledge, experience, voluntary activities, training etc.

If relevant to the post for which you are applying, you should include details about research experience, publications or poster presentations, clinical care (knowledge and skills) and clinical audit.

\* Supporting information (Please continue on additional sheets if necessary).

## References

Please provide the names and full contact details of the people who have agreed to supply references. References must include at least two positions with separate employers (including your current/most recent employer) and, as a minimum, cover a period of three years employment and/or training history, where this is possible.

Referees will be required to comment on your competence, personal qualities and suitability for the post. This may be your line/department manager, or someone in a position of responsibility for any work experience or placement undertaken. If you are a student or trainee (including being a Newly Qualified Teacher) this should include a teacher/tutor at your education institution.

If you currently work in a school, your first referee must be the school's Head Teacher/Principal.

If you are working with children, your present employer will be asked about any disciplinary offences relating to children (whether current or expired), whether you have been the subject of any substantiated child protection concerns and, if so, the outcome of these investigations. If you are not currently with children but have done so previously, these issues will be raised with your former employer.

If you have not been in employment for a considerable amount of time but have had previous employment, then you should seek one reference from your last known employer and a personal reference from a person of standing within your community such as a doctor, solicitor or MP who are not friends or any relation.

Please note that all reference requests will be followed up and verified by Tarka Learning Partnership and they must be satisfactory to us before any offer of employment is confirmed.

Referees may be approached prior to interview, unless you indicate otherwise below.

### Referee 1

* Type of Reference	<input type="checkbox"/> Employer <input type="checkbox"/> Educational <input type="checkbox"/> Personal		
Title			
*Surname/Family name		* First Name	
*Relationship			
Employer Name			
Referee Job Title			
*Address			
*Postcode/ Zip Code			
Telephone		*Country	
Email			
*Can the referee be contacted prior to interview?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

**Referee 2**

* Type of Reference	<input type="checkbox"/> Employer <input type="checkbox"/> Educational <input type="checkbox"/> Personal		
Title			
*Surname/Family name		* First Name	
*Relationship			
Employer name			
Referee Job Title			
*Address			
*Post Code/ Zip Code			
Telephone		*Country	
Email			
*Can the referee be contacted prior to interview?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

If you have applied to us within the last 3 months, are you happy for us to use the references from your earlier application?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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The information in this form is true and complete. I agree that any deliberate omission, falsification or misrepresentation in the application form will be grounds for rejecting this application or subsequent dismissal if employed by the organisation. Where applicable, I consent that the organisation can seek clarification regarding professional registration details.

I agree to the above declaration			
Signature			
Name		Date	

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## MONITORING INFORMATION

The Tarka Learning Partnership recognises the benefits of having a diverse workforce and therefore welcome applications from all sections of the community. In addition to this, under the provisions of the Equality Act 2010, all educational organisations are required to demonstrate that their recruitment processes are fair and that they are not discriminating against or disadvantaging anyone because of their age, disability, gender reassignment status, marriage or civil partnership status, pregnancy or maternity, race, religion or belief, sex or sexual orientation. Therefore a series of questions relating to protected characteristics need to be asked in order to ascertain who is applying for each position and to ensure that no one is being unfairly discriminated against or disadvantaged.

This form is not part of your application and the information you provide will stay confidential, and be stored securely and limited to only the relevant personnel. The information collected is only used for monitoring purposes in an anonymised format to assist the organisation in analysing the profile and make up of individuals who apply, are shortlisted for and appointed to each vacancy. In this way, they can check that they are complying with the Equality Act 2010.

Answers to all questions are optional. Any answers you provide are given with your consent. If you would like Tarka Learning Partnership to stop processing your data at any stage, you can get in touch with us at [admin@tarkatrust.org.uk](mailto:admin@tarkatrust.org.uk) or 01271 443120 to withdraw your consent. You can find out more about your data rights on our website at <https://tarkatrust.org.uk/about/gdpr/>.

### Equality Act 2010

The Equality Act 2010 protects people against discrimination on the grounds of their age and sex.

Please state your date of birth	
Please indicate your gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Intersex <input type="checkbox"/> Gender-fluid <input type="checkbox"/> Non-binary <input type="checkbox"/> Do you identify as transgender or formerly transgender <input type="checkbox"/> I do not wish to disclose this

### Equality Act 2010

The Equality Act 2010 protects people who are married or in a civil partnership.

Please indicate the option which best describes your marital status	
<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Civil partnership <input type="checkbox"/> Legally separated	<input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> I do not wish to disclose this

### Equality Act 2010

The Equality Act 2010 protects bisexual, gay, heterosexual and lesbian people from discrimination on the grounds of their sexual orientation.

Please indicate the option which best describes your sexual orientation

Do you identify as LGBT+?

- No
- Yes – lesbian, gay or bisexual +
- Yes – transgender or formerly transgender +
- Unsure/questioning my sexual orientation or gender identity
- Gender-fluid
- Pansexual
- I do not wish to disclose this

### Equality Act 2010

The Equality Act 2010 protects people against discrimination on the grounds of their race which includes colour, nationality, ethnic or national origin.

Please indicate your ethnic origin

#### Asian or Asian British

- Bangladeshi
- Indian
- Pakistani
- Any other Asian background

#### Mixed

- White & Asian
- White & Black African
- White & Black Caribbean
- Any other mixed background

#### Other Ethnic Group

- Chinese
- Gypsy/Traveller/Roma
- Any other ethnic group

#### Black or Black British

- African
- Caribbean
- Any other Black background

#### White

- British
- Irish
- Any other White background

- I do not wish to disclose this

### Equality Act 2010

The Equality Act 2010 protects people against discrimination on the grounds of their religion or belief, including a lack of any belief.

Please indicate your religion or belief

<input type="checkbox"/> Atheism <input type="checkbox"/> Buddhism <input type="checkbox"/> Christianity <input type="checkbox"/> Hinduism	<input type="checkbox"/> Islam <input type="checkbox"/> Jainism <input type="checkbox"/> Judaism <input type="checkbox"/> Sikhism	<input type="checkbox"/> Other <input type="checkbox"/> I do not wish to disclose this
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### Equality Act 2010

The Equality Act 2010 protects disabled people - including those with long term health conditions, learning disabilities and so called "hidden" disabilities such as dyslexia. If you tell us that you have a disability we can make reasonable adjustments to ensure that any selection processes - including the interview - are fair and equitable.

Do you consider yourself to have a disability?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I do not wish to disclose this information
Please state the type of impairment which applies to you. People may experience more than one type of impairment, in which case you may indicate more than one. If none of the categories apply, please mark 'other'.	
<input type="checkbox"/> Physical impairment <input type="checkbox"/> Sensory impairment <input type="checkbox"/> Mental health condition	<input type="checkbox"/> Learning Disability/Difficulty <input type="checkbox"/> Long-standing illness <input type="checkbox"/> Other
If you have a disability, do you wish to be considered under the guaranteed interview scheme if you meet the minimum criteria as specified in the person specification?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

Where did you see this vacancy advertised?