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|  | Personal Details | | | |
| Forenames: | |  | Surnames: |  |
| Title: | |  | Date of Birth: |  |
| Address: | |  | | |
| Postcode: | |  | National Insurance Number: |  |
| Email Address: | |  | | |
| Home Telephone: | |  | Mobile Telephone: |  |
| Nationality: | |  | Emergency Contact Details: |  |

**Apprenticeship Enquiry Form**

*Please note that this form may be forwarded to third parties in order to assess your eligibility to undertake an apprenticeship within their organisation. It is compulsory that employers complete additional employability checks.*

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| --- | --- | --- | --- | --- |
|  | Education | | | |
| Please list all of your qualifications below: | | | | |
| GCSE / GCE / Higher Education | | Subject | Grade/ Level | Date of award |
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|  | Previous / Present Employment | | | |
| Company Name | | Job Title / Post | Main responsibilities | Dates | |
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|  | Personal Statement |
| Please give details of any relevant experiences, skills or knowledge to support your application. | |
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|  | References | |
| Please provide details of two referees below.  Friends and relatives are NOT acceptable referees.  Both referees must be able to comment authoritatively on your educational background, suitability and personal qualities. | | |
| Reference 1 | | |
| Name: | |  |
| Status: | |  |
| Organisation: | |  |
| Postcode: | |  |
| Telephone: | |  |
| Email Address: | |  |
| Reference 2 | | |
| Name: | |  |
| Status: | |  |
| Organisation: | |  |
| Postcode: | |  |
| Telephone: | |  |
| Email Address: | |  |

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|  | Equality Act 2010 | |
| The Equality Act 2010 states a person has a disability if they have a physical or mental impairment which has a long-term and substantial adverse effect on their ability to carry out normal day-to-day activities.  The Act requires an employer to make reasonable adjustments to working conditions in order to enable applicants to have equal access to employment opportunities.  The employer is committed to the development of positive practise to promote equality in employment. Active Fusion guarantees an interview to disabled applicants who meet the essential shortlisting requirements.  If you would like to declare your disability, please tick the appropriate box below. | | |
| Do you consider yourself to be disabled as defined by the Equality Act 2010? | | YES NO |

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|  | School Locations | | |
| Do you hold a current full UK Driving Licence? | | YES NO | |
| If no, do you intend to gain a Driving Licence throughout the course? | | YES NO | |
| Do you have regular use of a vehicle? | | YES NO | |
| If no, do you intend to gain access to a vehicle throughout the course? | | YES NO | |
| *Please tick below which locations you could access?* | | | |
| Doncaster | | |  |
| Rotherham | | |  |
| Sheffield | | |  |
| Barnsley | | |  |

**Type of school interested in** *(please circle at least one of these options)*

**Primary**

**Secondary**

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|  | Disclosure of Criminal Background | |
| 1. DBS – As you are applying to work in a school a standard or enhanced DBS check is required please disclose any convictions, cautions, reprimands or final warnings that are not “protected” as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013).   The amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are ‘protected’ and are not subject to disclosure to employers and cannot be taken into account. All guidance and criteria on the filtering of these cautions and convictions can be found in the DBS filtering guidance. | | |
| Have you been convicted of a criminal offence? | | YES NO |
| Have you been cautioned for a criminal charge? | | YES NO |
| Are you at present the subject of a criminal charge?  Have you lived or worked outside the UK in the past 5 years? | | YES NO  YES NO |
| If YES to any of the above questions, please give brief details including dates: | | |
|  | | |

**SEND (Special Needs School)**

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| --- | --- |
|  | Personal Statement |
| Tell us why you are the right candidate for this position and tell us about your experiences which are related to our apprenticeship programme (please aim to fill this box as a minimum. Carry on to additional page if needed. | |
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|  | Data Protection |
| By providing personal information in support of your application on this form you agree to Active Fusion and any future employer processing this personal information for the purposes of managing your application and for the performance of any contract of employment that may be entered into. We cannot process your application without this information.  If successful, your personal information will be retained whilst you are employed and used for HR, payroll and pension related administration at the school you will be working in. All copies of your personal information will be kept securely both by Active Fusion and your place of employment and will not be shared with any other establishment or agency without your permission.  You have the right to request copies of your personal information and you may request that information is corrected or deleted. If you wish to contact us about how your personal data is handled, please contact Active Fusion on 01302 637276 or your place of employment when it is known. | |

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|  | Declaration | |
| I declare that, to the best of my knowledge and belief, the information given on ALL parts of the form is correct. I understand that, should my application be successful and it is discovered subsequently that information has been falsified, then disciplinary action may be taken which may include dismissal from the post.  I confirm that I have legal right to work in the UK and if the application is successful, I undertake to produce appropriate documentary evidence to prove this, prior to commencing the apprenticeship.  I confirm that I am happy for my information supplied on this form to be shared by Active Fusion with potential employers. | | |
| Signed: | | Date: |