



Brine Leas School

Application form for: Cleaning Supervisor

(Support Staff Job Role)

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1. Data protection notice

Throughout this form we ask for some personal data about you. We'll only use this data in line with data protection legislation and process your data for one or more of the following reasons permitted in law:

- You have given us your consent
- We must process it to comply with our legal obligations
- We need to process it for our legitimate interests

You'll find more information on our legitimate interests and how we use your personal data in our [privacy notice](#) for job applicants.



2. Vacancy information

Application for the post of:

What date are you available to begin a new post?:

Recruitment monitoring

Where did you first hear about this job?:

3. Disclosure and Barring and childcare disqualification

Rehabilitation of Offenders Act 1974

All posts involving direct contact with children are exempt from the Rehabilitation of Offenders Act 1974. The successful applicant will be required to apply for an enhanced DBS certificate. As the post will involve regulated activity with children, it is a criminal offence to apply for this post if you are included on the children's barred list held by the DBS.

Amendments to the Exceptions Order 1975 (2013, 2020 & 2023) provide that certain spent convictions and cautions are 'protected'. These are not subject to disclosure to employers and cannot be taken into account. Guidance and criteria on the filtering of these cautions and convictions can be found on the Ministry of Justice website or visit

Shortlisted candidates will be asked to provide details of all unspent convictions and those that would not be filtered, prior to the date of the interview. You may be asked for further information about your criminal history during the recruitment process. If your application is successful, this self-disclosure information will be checked against information from the Disclosure & Barring Service before your appointment is confirmed.

I confirm that the above information is complete and accurate, and I understand that any offer is subject to references which are satisfactory to the school, a satisfactory DBS certificate and Barred List Check, any other checks required by the school and the entries on this form proving to be complete and accurate. I confirm that I have not been disqualified from working with children, cautioned or sanctioned in this regard.

Sign and Date:

4. Right to work in the UK

The School will require you to provide evidence of your right to work in the UK in accordance with the Immigration, Asylum and Nationality Act 2006.

By signing this application, you agree to provide such evidence when requested.

Sign and date:



Brine Leas School
An Academy
'Believe, Learn, Succeed'



5. Instructions

Please complete all sections of this form using black ink or type.

The sections of this application form that include your personal details and equalities monitoring information will be detached prior to shortlisting. This is to ensure that your application is dealt with objectively.

Applications will only be accepted if they are completed in full:

- Please do not send your CV
- Please return your completed application form and supporting letter via the external post to HR Manager, Brine Leas School, Audlem Road, Nantwich, Cheshire, CW5 7DY or by email: job.applications@brineleas.co.uk



6. Personal details

First name	
Surname	
Preferred title	
Previous surnames	
If you prefer to be called by a name other than the one listed above, please specify	

Contact details

Address	
Postcode	
Home phone	
Mobile phone	
Email address	



7. Disability and Accessibility

We are an equal opportunity public sector employer. We ask you as part of your application and interview questions about health and disability in order to:

- Cater to your needs if we may need to make reasonable adjustments to the application / selection process.
- Monitor the diversity of applicants.
- Support positive action for disabled people.

We do not use your responses about health or disability as part of the decision-making process during the application / selection process.

Do you have a disability as defined under the Equality Act 2010? (Yes/No)

Do you have a health condition that we can make reasonable adjustments for during the application / selection process? (Yes/No)

If yes, are there any reasonable adjustments we can make to support you through the application / selection process?

We will ask you further questions about health or disability if we make you a job offer in order to offer you support.

Definition of disability under the Equality Act 2010

You're disabled under the Equality Act 2010 if you have a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities.

What 'substantial' and 'long-term' mean

- *'substantial' is more than minor or trivial, e.g. it takes much longer than it usually would to complete a daily task like getting dressed.*
- *'long-term' means 12 months or more, e.g. a breathing condition that develops as a result of a lung infection.*

Part of our duty as a public sector employer is to monitor diversity and inclusion. We ask questions on protected characteristics to do this. The information is not used in the application or selection process.

Protected Characteristics



8. Relationship to the School

Please list any personal relationships that exist between you and any of the following members of the School community:

- Governors/trustee
- Local governors
- Staff
- Pupils

If you have a relationship with a governor, trustee, local governor or employee, this does not necessarily prevent them from acting as a reference for you.

Name	Relationship	Role at the School



9. Employment History

Current employment details (Support Staff roles)

Job title	Employer details (name, address, email and/or telephone)	Dates employed	Permanent or temporary	Part-time or full-time	Salary details	Description of responsibilities



Previous employment

Please provide details of previous employment. List the most recent employment first.

Job title	Name and address of employer	Dates employed	Description of responsibilities	Reason for leaving

Gaps in employment

Please use the space below to explain any gaps in your employment.

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10. Education, qualifications and Training

Please provide details of your education from secondary school onwards.
You'll be required to produce evidence of qualifications.

Dates attended (month and year)	Name and location of school/college/university	Qualifications gained (including grades)

Training and professional development

Please give details of training or professional development courses undertaken in the last 3 years that are relevant to your application.

Course dates	Length of course	Course title	Qualification obtained	Course provider



11. Additional information

Please provide any additional information relevant to this application. You may wish to discuss additional skills or relevant special interests.

12. Driving licence details

Do you have a valid driving licence?	
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13. Letter of application

Please attach an accompanying letter explaining why you're applying for this post and how your experience, training and personal qualities match the requirements of the role as set out in the job description and person specification.

Please also include your surname and the title of the post you're applying to as the filename for the attachment.

- Please include no more than 500 words in your letter of application
- You should outline:
 - why you think you are the right person for this post.
 - include sections on your relevant experience
 - what you hope for from the school.



14. References

You must provide the name of two referees:

- Who are willing to provide a reference 24 hours before the interview date.
- At least one referee must be your most recent employer.
- At least one referee must be the Headteacher/Principal of the most recent school you have worked in (if possible).
- If you are not currently working with children, then at least one referee must be from the relevant employer (or training provider) from the last time you worked with children (if possible).
- If you are currently in training, then at least one referee must be an appropriately senior person at the training provider.

Personal referees will not be accepted and should not be included on this form.

Referee #1 Name and Salutation		Referee #2 Name and Salutation	
Job Title		Job Title	
School / Business Name		School / Business Name	
School / Business Address (incl. Post Code)		School / Business Address (incl. Post Code)	
School / Business Telephone Number		School / Business Telephone Number	
School / Business email Address		School / Business email Address	
Most recent employer? (tick)		Most recent employer? (tick)	
Most recent school? (tick)		Most recent school? (tick)	

If either of your referees knows you by a different name, please state:

If you don't wish us to contact your referees without your prior agreement, please tick this box:



15. Equalities monitoring information

We're bound by the Public Sector Equality Duty to promote equality for everyone. To assess whether we're meeting this duty, whether our policies are effective and whether we're complying with relevant legislation, we need to know the information requested below.

This information will **not** be used during the selection process. It will be used for monitoring purposes only.

What is your date of birth?	D	D	M	M	Y	Y	Y	Y
What is your sex?	<input type="checkbox"/> Male							
	<input type="checkbox"/> Female							
What gender are you?	<input type="checkbox"/> Male							
	<input type="checkbox"/> Female							
	<input type="checkbox"/> Other							
	<input type="checkbox"/> Prefer not to say							
Do you identify as the gender you were assigned at birth?	<input type="checkbox"/> Yes							
	<input type="checkbox"/> No							
	<input type="checkbox"/> Prefer not to say							



How would you describe your ethnic origin?

<p>White</p> <p><input type="checkbox"/> British</p> <p><input type="checkbox"/> Irish</p> <p><input type="checkbox"/> Gypsy or Irish Traveller</p> <p><input type="checkbox"/> Any other White background</p> <p>Asian or British Asian</p> <p><input type="checkbox"/> Bangladeshi</p> <p><input type="checkbox"/> Indian</p> <p><input type="checkbox"/> Pakistani</p> <p><input type="checkbox"/> Chinese</p>	<p>Black or Black British</p> <p><input type="checkbox"/> African</p> <p><input type="checkbox"/> Caribbean</p> <p><input type="checkbox"/> Any other Black background</p> <p>Mixed</p> <p><input type="checkbox"/> White and Asian</p> <p><input type="checkbox"/> White and Black African</p> <p><input type="checkbox"/> White and Black Caribbean</p> <p><input type="checkbox"/> Any other mixed background</p>	<p>Other Ethnic groups</p> <p><input type="checkbox"/> Arab</p> <p><input type="checkbox"/> Any other ethnic group</p> <p><input type="checkbox"/> Prefer not to say</p>
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Which of the following best describes your sexual orientation?

<p><input type="checkbox"/> Bisexual</p> <p><input type="checkbox"/> Heterosexual/straight</p> <p><input type="checkbox"/> Homosexual man</p> <p><input type="checkbox"/> Homosexual woman</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> Prefer not to say</p>
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What is your religion or belief?

<p><input type="checkbox"/> Agnostic</p> <p><input type="checkbox"/> Atheist</p> <p><input type="checkbox"/> Buddhist</p> <p><input type="checkbox"/> Christian</p> <p><input type="checkbox"/> Hindu</p>	<p><input type="checkbox"/> Jain</p> <p><input type="checkbox"/> Jewish</p> <p><input type="checkbox"/> Muslim</p> <p><input type="checkbox"/> No religion</p>	<p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> Pagan</p> <p><input type="checkbox"/> Sikh</p> <p><input type="checkbox"/> Prefer not to say</p>
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Are your day-to-day activities significantly limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Prefer not to say</p>
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If you answered 'yes' to the question above, please state the type of impairment. Please tick all that apply. If none of the below categories applies, please mark 'other'.

- Physical impairment
- Sensory impairment
- Learning disability/difficulty
- Long-standing illness
- Mental health condition
- Developmental condition
- Other