**Applications can also be returned by e-mail to:** mthompson@swaledalealliance.org

**SECTION 1 – COURSE DETAILS**

Course Reference Number: 603/2498/3

**Course Title: NCFE CACHE Level 3 Certificate in Supporting Teaching & Learning**

Closing Date: Friday 28th March 2025

**Please write in capital letters in black ink or type.**

**This application form has been designed to exclude information that might lead to discrimination.**

**SECTION 2 - PERSONAL DETAILS**

|  |  |
| --- | --- |
| Title: | First forename: |
| Other forename: | Surname: |
| Former Surname: | Other names: |
| Address line 1: | Address line 2: |
| Town: | County: |
| Postcode: | Country: |
| Home Phone No.: | Resident at this address since (Date): |
| Mobile Number: | Work Number: |
| Email Address: | |
| I am over 18 YES / NO (delete as appropriate) | |

**Please note correspondence regarding your application may be sent to your e-mail and/or postal address.  Applicants who have not heard within 21 days of the closing date are thanked for their application and are asked to assume that it has been unsuccessful on this occasion.**

**SECTION 3 - PERSONAL DETAILS CONTINUED**

**Whilst the role you are applying for is on a voluntary basis, we are required to ask the following questions to fulfil our recruitment process.**

Are there any restrictions to your residence in the UK which might affect your right to take up employment in the UK? Yes  No

If Yes, please provide details:

If you are successful in your application, would you require a work permit or visa prior to taking up employment? Yes  No

If Yes, please specify dates:

Date: From (Month/YYYY)

Date: To (Month/YYYY)

Have you ever lived and/or worked outside of the UK? Yes  No

If Yes, please provide details:

Do you hold a Certificate of Good Conduct for your time spent abroad? Yes  No

If yes, please provide the date of issue:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Insert your National Insurance Number: |  |  |  |  |  |  |  |  |  |

**SECTION 4 – SOURCE OF APPLICATION**

Where did you see the vacancy advertised? Please specify:

**SECTION 5 – SECONDARY EDUCATION**

**Detail here any qualifications held (continue on a separate sheet if necessary).**

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject** | **Qualification** | **Grade** | **Month and Year obtained (Mandatory)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**SECTION 6 – FURTHER EDUCATION**

**Detail here any Further Education/Vocational/Professional Qualifications/Other Qualifications held or currently being studied (continue on a separate sheet if necessary).**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **School, College or University** | **Subject** | **Qualification/Level** | **Grade** | **Year Obtained / Examination Date** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**SECTION 7 – RELEVANT COURSES**

**Please give details of recent significant in-service training courses etc. attended. (Continue on a separate sheet if necessary).**

|  |  |  |
| --- | --- | --- |
| **Organising Body** | **Nature/Title of Course** | **Dates** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**SECTION 8 – EMPLOYMENT DETAILS**

Have you previously worked for or are currently working for North Yorkshire County Council? *(An employee is defined as someone who is paid directly by NYCC and does not include those working in a voluntary capacity or via an agency)*

Yes  No

|  |  |
| --- | --- |
| Manager’s name and job title: | Job Title: |
| Place of work: | Employment start date (Month/YYYY): |
| Employment end date (Month/YYYY)  (if applicable): | Reason for leaving (if applicable): |
| Number on roll (*teaching roles only):* | Age Range (*teaching roles only):* |
| Employee reference number: |  |

**SECTION 9 – PRESENT OR MOST RECENT EMPLOYMENT**

|  |  |
| --- | --- |
| Name of Employer: | |
| Local Education Authority: | |
| Address line 1: | Address line 2: |
| Town: | County: |
| Postcode: | Country: |
| Post held: | Grade: |
| Number on roll (*teaching roles only):* | Age Range (*teaching roles only):* |
| Date of appointment (Month/YYYY): | Salary: |
| Notice Required: Weeks/Months | Telephone number: |
| Leave date (if applicable- Month/YYYY): | Reason for leaving (if applicable): |
| Summary of current job role; duties and responsibilities | |

**SECTION 10 – PREVIOUS RELEVANT EMPLOYMENT**

|  |  |
| --- | --- |
| **Name of Employer:** | |
| Address line 1: | Address line 2: |
| Town: | County: |
| Postcode: | Country: |
| Post held: |  |
| Job Role Summary: | |
| Grade / Salary: | Date from (Month/YYYY): |
| Date to (Month/YYYY): | Reason for leaving (if applicable): |

|  |  |
| --- | --- |
| **Name of Employer** | |
| Address line 1: | Address line 2: |
| Town: | County: |
| Postcode: | Country: |
| Post held: |  |
| Job Role Summary: | |
| Grade / Salary: | Date from (Month/YYYY): |
| Date to (Month/YYYY): | Reason of leaving (if applicable): |

|  |  |
| --- | --- |
| **Name of Employer:** | |
| Address line 1: | Address line 2: |
| Town: | County: |
| Postcode: | Country: |
| Post held: |  |
| Job Role Summary: | |
| Grade / Salary: | Date from (Month/YYYY): |
| Date to (Month/YYYY): | Reason of leaving (if applicable): |

|  |
| --- |
| **SECTION 11 – ASSESSOR or MENTOR EXPERIENCE** |

**Please briefly outline your experience as an assessor or in supporting adult learners. (eg ITT mentor)**

|  |
| --- |
| **Experience** |
|  |

**SECTION 12 – HEADTEACHER DETAILS**

Please provide your Headteacher’s or Line Manager’s details.

|  |  |
| --- | --- |
| Headteacher / Line Manager Name: | |
| School Name: | |
| Telephone number: | Email address: |
| I confirm I have discussed this application with my Headteacher / Line Manager | Yes No |

**SECTION 13 – DECLARATIONS AND CONSENTS**

|  |  |
| --- | --- |
| Are there any reasonable adjustments that you would require to enable you to participate in the interview/assessment event if you were selected to attend? | |
| Are you related to a member of a School Governing Body within the Swaledale Alliance group of schools? | Yes  No |
| If ‘Yes’, please provide name(s) & relationship: |  |
| I understand that canvassing of any Governors, Members or Officers of North Yorkshire County Council in connection with this appointment will disqualify me. | Yes  No |

**Has any previous employer expressed concerns and/or taken any action, whether informal/ formal (including suspension from duty) on the following: (Include any investigations or actions taken by your professional body)**

|  |  |
| --- | --- |
| **Capability or work performance** | Yes  No |
| Please provide details: | |
| **Disciplinary** | Yes  No |
| Please provide details:  You are only required to declare live disciplinary sanctions unless they relate to safeguarding (see below) | |
| **Safeguarding** | Yes  No |
| Please include details of any allegations which have been made against you and how these have been categorised. Any disciplinary sanctions relating to safeguarding must also be declared, including those which have expired for disciplinary purposes. | |
| Are there any dates when you would not be available for interview in the near future? | Yes  No |
| Please provide details: | |
| Do you hold a current driving licence? | Yes  No |
| Do you have use of a car? | Yes  No |
| I declare that the information contained in this application form is correct and understand that the Swaledale Alliance/work experience school will request to see proof of qualifications at the time of interview. | Yes  No |
| I consent to the Swaledale Alliance/work experience school recording and processing the information detailed in this application. The Swaledale Alliance l will comply with their obligation under the Data Protection Act 2018. | Yes  No |