

MMPS

Lunchtime Organiser Application Form

POST DETAILS

Job Title: Lunchtime Organiser Advert Reference Number: School: MMPS Closing Date:	Your application should be returned to: F.A.O. The Head Teacher Manchester Muslim Preparatory School The Grange 551 Wilmslow Road Withington Manchester M20 4BA
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PERSONAL DETAILS

Surname:	Forename(s):
How do you wish to be addressed in correspondence? <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Mr. <input type="checkbox"/> Other (Please state):	
Your place of birth: _____	
Home Address:	Correspondence address if different to home address:
Postcode: <input type="text"/>	
Daytime telephone number:	Evening telephone number:
Do you hold a current driving licence? <input type="checkbox"/> Yes <input type="checkbox"/> No. Do you require a work permit? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Can we contact you via e-mail? <input type="checkbox"/> Yes <input type="checkbox"/> No E-mail address: _____	
National Insurance Number: <input type="text"/>	

EMPLOYMENT HISTORY

CURRENT OR MOST RECENT EMPLOYMENT	
	EMPLOYER'S NAME AND ADDRESS
Post Title:	
Dates from/to:	
Salary or wage:	
Allowances, or additional salary points:	Telephone:
If part time please show weekly hours:	Length of notice or date able to commence:
Brief description of duties:	

Reason for wishing to leave (please indicate if you do not intend to resign from your current post):

PREVIOUS EMPLOYMENT					
EMPLOYERS NAME AND ADDRESS	POSITION HELD (if part-time, show weekly hours)	SALARY/WAGE	DATES		REASON FOR LEAVING
			From	To	

EDUCATION AND QUALIFICATIONS

Please give details of your education and qualifications, make sure you include professional qualifications. Please note that if you are appointed to a post where qualifications are an essential requirement you may be asked, before your appointment is confirmed, to present the original copies issued to you by the examining body (photocopies will not be acceptable).

SCHOOL, COLLEGE OR UNIVERSITY	QUALIFICATIONS Examination subjects, if applicable, indicate main / subsidiary subjects	RESULT GRADE OR CLASSIFICATION	HOW OBTAINED (Full time, part time or correspondence)	PERIOD OF STUDY	
				From	To

OTHER TRAINING

List all training undertaken including in-service courses. Please include membership and grade of professional organisations.

COURSE AND TRAINING DETAILS	RESULTS	WHERE OBTAINED	FULL TIME, PART TIME, RESIDENTIAL	DATES	
				From	To

EQUAL OPPORTUNITY AND EMPLOYMENT

As an equal opportunities employer, MMPS seeks a workforce which reflects the community we serve. We welcome applications from those groups which are under-represented on our staff. Applicants for jobs are judged only on their skills and suitability for the vacancy. To assist us to carry out our equal rights policy you are asked to provide the information requested below.

Ethnic Classification: The classifications used have been recommended by the Commission for Racial Equality. A further grouping of 'other - please specify' is included to accommodate those who do not perceive themselves as any of those listed or whose origins lie outside the main regional groupings.

I would describe myself as (please tick)

- Bangladeshi Black-African Black-Caribbean Black-Other Chinese
 Indian Irish Kashmiri Pakistani White
 Other - please specify:
-

I am: Female Male

Job sharing: If this post is fulltime and it has been advertised as being suitable for job sharing, please tell us whether you are applying for a fulltime post or willing to job share, or whether you would consider either:

- Full time Job share Either

If you would like to job share this post but are unsure as to whether this is possible please contact the school or department concerned.

DISABILITY

Do you consider you have any medical condition or disability, which may be covered by the provisions of the Disability Discrimination Act (1995)?

Please tick and if you answered YES please give brief details.

- No Yes

Do you have any specific requirements to enable you to attend an interview? Please tick. If you answer YES please give brief details.

- No Yes

LANGUAGE SKILLS

Do you speak or write any other languages other than English? No Yes

 Speak

Write		
<input type="checkbox"/> Language:.....		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		

IMPORTANT NOTES

Rehabilitation of Offenders Act (1974)

Posts which involve substantial access to children are exempt from provisions contained within this Act under which job applicants are entitled to withhold information about any previous criminal background which would otherwise be considered 'spent' under the terms of the Act. If the job for which you have applied involves substantial access to children and you have been short listed for the post, you will be provided with a form on which you will be asked to disclose any previous criminal background and also authorise a search of Police records. Failure to disclose the information could result in dismissal or disciplinary action by the Council. The possession of a criminal record will not automatically debar you from consideration for the post for which you have applied. Any information given will be treated as confidential and will only be used in relation to the post for which you have applied.

Policy Statement

MMPS and its employees are committed to the rights of the child, the child's safety and emotional well being, and the protection of the child from all forms of abuse.

REFERENCES

It is policy to take up references for short listed candidates. Give names and addresses of two referees, one of which should be your present or most recent employer. If you are known to your referee /s by a former name please supply the name by which you were known. If you have not previously been employed, give the name of someone who knows you well. Please do not give the name of a relative as a referee.

NAME OF REFEREE	STATUS OR JOB	ADDRESS FOR CONTACT
1. Tel No.		
2. Tel No.		

May we approach your present employer before the interview?

Yes No

DECLARATION

Are you related to **any** member of staff within MMPS Establishment?

Yes No

If Yes, give details:

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.....

I DECLARE THAT THE INFORMATION ON THIS FORM IS CORRECT TO THE BEST OF MY KNOWLEDGE AND I NOTE THAT THE WITHHOLDING, FALSIFICATION OR OMISSION OF RELEVANT INFORMATION BY A SUCCESSFUL CANDIDATE ARE GROUNDS FOR DISCIPLINARY ACTION WHICH MAY LEAD TO DISMISSAL.

Signed:

Date:

.....

How did you learn of this vacancy?

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ADDITIONAL INFORMATION

You are strongly advised to submit a separate personal statement in support of your application. This should give any additional relevant information, including details of your professional, subject and leisure interests and any skills and experience, which may be useful in schools. This should be no longer than one A4 page.

In addition to this, you must also enclose the following:

1. A valid photocopy of a CRB/List 99 check
2. A photocopy of your qualifications
3. Fill in and return the Medical Questionnaire.

NB: Your application form may not be processed without the above documentation.

Thank you very much for filling in this form.

FOR SELECTORS' USE ONLY For selection and monitoring purposes.

PERSONNEL SPECIFICATIONS			Comments:
Experience		Equal Opportunities	
Qualifications	Other qualifications	Disposition and Attitude	
Training		Practical and Intellectual Skills	
Special Knowledge		Physical/ Medical Fitness to	

	Sensory	Teach Other /sensory	physical	
Personal Circumstances	Other			