Dominican College, Portstewart

Application for Non-Teaching Post

Applicants must complete all sections of the form in full and should not submit a Curriculum Vitae.
To facilitate photocopying please complete in BLOCK LETTERS USING BLACK INK.

Application No. _____
(For Official Use Only)

Post	Science Technician (full-time permanent)
Location	Dominican College, Portstewart
Closing Date and Time	Noon, Friday 31st May 2019

Applicants should refer to the Guidance for Applicants before completion of this form. Applicants must ensure they provide sufficient information on the application form to enable the selection panel to assess their eligibility for consideration. Failure to do so will result in the application being rejected.

1 PERSONAL DETAILS		
Surname:	**Previous Surname(s):**	**Dr/Mr/Mrs/Ms/Miss**
Forename(s)		
Address: **Postcode:**	**Telephone number: (Home)** ..... **(Daytime contact number)**	
E-mail address:	**National Insurance No.**	
Are you an EU citizen? YES/NO	**Do you have access to a car or other suitable form of transport if necessary to meet the essential requirements of the post? YES/NO**	
Do you hold a current driving licence? YES/NO If yes please state type of licence		

2 QUALIFICATIONS (Original documentary evidence will be required from the successful candidate)

Subject obtained/to be taken	Level of exam	Examining Body	Grade	Year obtained/expected
Subject obtained/to be taken	**Level of exam**	**Examining Body**	**Grade**	**Year obtained/expected**

Membership of Professional Body

Name of professional body	Qualification/Membership status (please indicate if obtained by examination)	Date obtained

3 PRESENT EMPLOYMENT

Name and address of employer:

Position/Grade:	Date of appointment:	Annual salary/wage:	Period of notice required:

Nature of duties:

4 PREVIOUS EMPLOYMENT **Please give details of past employment (beginning with the most recent)**

Name and address of employer	Job title/Grade	Period of employment *dd/mm/yy* From	To	Main duties and responsibilities	Reason for leaving

5 RELEVANT INFORMATION (IMPORTANT - PLEASE PROVIDE DETAILS OF HOW YOU MEET THE ESSENTIAL AND DESIRABLE CRITERIA TOGETHER WITH ANY ADDITIONAL INFORMATION YOU CONSIDER RELEVANT TO THE POST)

6 GAPS IN EMPLOYMENT HISTORY Please account below for any time since leaving school which has not been included in previous information.

7 CHILD PROTECTION (Please note this post may involve regulated activity as defined under Safeguarding Vulnerable Groups (NI) Order 2007 (see guidance for applicants))
Is there any reason as to why you would not be suitable to work with children/young people in an educational setting?

8 REFERENCES	
Please give the names and addresses of two referees, one of whom should be a previous or current employer able to comment on your suitability to work with children/young people in an educational setting (if applicable) and/or your professional ability. Prior consent of referees should be obtained. References must not be submitted with this form.	
1 **Position held:**	**2** **Position held:**
Any person involved in the recruitment process for the post for which you are currently applying cannot act as a referee.	

The Board/Board of Governors will seek references from present/previous employers for posts involving "regulated activity"

9 DISABILITY
In accordance with the Disability Discrimination Act, a person is disabled if they have, or have had, "a physical or mental impairment which has, or has had, a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities". If you consider yourself to have or have had a disability that is relevant to the position for which you are applying please provide any relevant information about your requirements so that we can process your application fairly and make any reasonable arrangements/adjustments for your attendance at interview if shortlisted. .... **The Board, as part of its Equal Opportunities Policy, welcomes applications from people with disabilities.**

10 DECLARATION (CANVASSING / FALSE DECLARATION / CONSENT / DATA PROTECTION)
I hereby certify and declare that: 1) The information supplied by me in this application is correct to the best of my knowledge and belief and acknowledge that if I am appointed to the position now sought statements of material fact herein subsequently discovered to be untrue may be considered by the Board as sufficient grounds to warrant termination of my appointment on the grounds of misconduct. I declare that I have not canvassed in any way. 2) I understand this post is (or may be) exempt from the provisions of the Rehabilitation of Offenders (NI) Order 1978 by virtue of the Rehabilitation of Offenders (Exemptions) (NI) Order 1979 and (Exceptions Amendment) Order (Northern Ireland) 1987. In the event of my application being successful, I consent to a check being made with AccessNI to determine if there is any record of convictions, cautions or bind-overs against me. The Board strictly follows the Access NI Code of Practice, available to view at www.dojni.gov.uk/accessni 3) The information on this form is required by the Board for the purpose of processing your application. The information is covered by the provisions of the Data Protection Act 1998. I understand that my signature is authorisation for the Board to process and retain the information for the purpose(s) stated. Signature ..... Date .....

Please complete and return this form, with the Monitoring Questionnaire to the address below by the date and time shown on the front of the form.

LATE APPLICATIONS WILL NOT BE CONSIDERED