

Closing date: Midday o	
,	Teaching Assistant
School: Queensw	on Thursday 9 <sup>th</sup> October 2025
Sweets W London, N 020 8445 office@qu	N20 0NQ

# **Application Form**

Queenswell is committed to protecting and safeguarding children and vulnerable adults. We apply stringent safer recruitment practices.

Please ensure that all sections are completed, all information that you provide will be treated as

confidential. The Declara					<i>,</i> , ,
J		1 1			
1. About you		Γ			
Title:					
First names:					
Previous names:					
Surname:					
Previous surnames:					
National Insurance Numb	er				
Address:					
Postcode:					
Email:			Daytime t	elephone	
			number		
Mobile:			Evening telephor		
			number		 
May we contact you at v			Yes		No L
Where did you see this vo (publication/website)	acancy	advertised?			
2. Employment history Ple must be explained and a				mployers. Any	gaps in employment
Employers' names,		Job title, Key	Dates of a	employment	Reason for leaving
addresses and type of		oonsibilities, final	From	To	Reason for leaving
business		alary and any allowances			

acquired outside of empl	ated to the skills, abilities a	your home c	ind caring fo	r dependants/family. Your		
Type of experience	Type of experience Dates					
4. Education, qualifications and training – any gaps must be explained and a continuation sheet used if required.						
Name of school,	Name of course		ites	Qualification/grade		
college, university etc.		From	То	achieved		
5. Professional association	momborship					
		T		T		
Name of professional asso	ociation	Year of mer	mbership	Grade/level		

3. Other relevant experience

6. Personal statement Relevant abilities, skills, knowledge and experience. Tell us how you meet all of the short listing criteria set out in the enclosed Person Specification, drawing on all aspects of your education and experience, including paid employment and unpaid work.				
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Are you required to have a UK work visa/permit?  Yes No				
If yes, do you have a	a valid visa/permit?		Yes No	
If yes, when does it e	expire?		dd/mm/yyyy	
7. References Please give details of two referees from whom confidential enquiries may be made. Your referees should be from your current or most recent employer or your current educational establishment. We reserve the right to contact any of your previous employers				
Name of referee:		Name	of referee:	
Job title:		Job tit	le:	
Organisation:		Orgar	nisation:	
Address:		Addre	ess:	
Telephone:		Teleph	none:	
Email:		Email:		
Capacity in which known to you:			city in which n to you:	

All applicants are required to declare personal relationships with existing Council employees and Council members. Canvassing of elected councillors or officers involved in the selection process directly or indirectly will automatically disqualify the applicant.	Any financial interests that applicants may have in contracts with the Council or pending Council tenders must be declared.
Are you related to, or a close friend of, any elected councillor or member of staff employed by Barnet Council?  Yes \( \subseteq \text{No} \subseteq \)	Are you or any of your relatives party to an existing Council contract or involved in any competitive tendering process?  Yes No No
If yes, please state their name and your relationship with them:	If yes, specify the contract details:
Name: Relationship:	
I certify that, to the best of my knowledge, the information I have supplied is false or misleading in appointment or may render me liable to dismissal winformation provided by me on this form may be preregistration under the 1998 Data Protection Act and	true and accurate. I understand that if the any way, it will automatically disqualify me from without notice. I give explicit consent that the ocessed in accordance with the Council's

8. Declaration

references are taken up.

Signed – Applicant:

Please note that successful candidates will be required to sign their application form prior to appointment.

Date: dd/mm/yyyy

## Declaration of criminal offences

Please read the following notes carefully

You must inform us of any offences, convictions, cautions, and bindovers or of any court cases that you have pending. Under the provision of The Rehabilitation of Offenders Act 1974, some job applicants do not have to disclose information on certain convictions after a set period of time, as they become 'spent' (see table below).

The Rehabilitation of Offenders Act 1974 applies to offences where a custodial sentence in prison (or detention in a young offenders institution) of less than 30 months was imposed. It is the sentence imposed by a court that counts (even if a suspended sentence), not the time spent in custody. Any prison sentence greater than 30 months never becomes 'spent'.

For some jobs, all convictions must be declared and can never be considered 'spent'. For more information, please see the section below entitled 'exemptions' and information on the person specification. Failure to declare may result in the job offer being withdrawn.

### 1. Rehabilitation periods

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Sentence	Time elapsed since conviction
Absolute Discharge	6 months
Borstal/Youth Custody	7 years
Care or Supervision order	1 year or until order expires (whichever is the longest)
Detention Centre	3 years
Fine or other sentence for which the Act does not specify a different rehabilitation period	5 years*
Hospital order (with or without a restriction order)	5 years, or 2 years after the order expires
Imprisonment or youth custody sentence of less than 6 months	7 years*
Imprisonment or youth custody sentence of over 6 months but not more than 2 ½ years	10 years*
Order for custody in a remand home, approved school order or an attendance centre order	1 year after order expires
Probation order, conditional discharge or bound over	1 year or until order expires (whichever is the longest)

<sup>\*</sup> The above times are halved if the offender was under 18 when the offence was committed.

#### 2. Exemptions

If you are applying for a job in any of the following categories, you must inform us of all offences, convictions, bindovers or of any court cases pending. All convictions must be declared and can never be considered spent:

- 1. Work involving access to children
  - a) Any post whose normal duties involve carrying out work of any sort in the following establishments
    - a care or residential home exclusively or mainly for children
    - an educational institution (school, college, nursery)
    - a children's home
  - b) A position whose normal duties include, caring for, training, supervising or being in sole charge of children (social workers, teachers, youth workers, leisure and recreation posts, care staff, staff responsible for accommodation)
  - c) Day care premises during periods when children are present
  - d) A position whose normal duties involve unsupervised contact with children under arrangements made by a parent/guardian
  - e) A supervisor or manager of an individual in categories a-d.
  - f) Senior posts responsible for education or social care functions of a local authority, e.g. a Chief Education Officer

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/ .	VVUIN	11 1 2 ( ) 1 2 11 1( )	$C_1C_1C_2C_2C_3$	vulnerable	CIULUIS

Any employment concerned with the provision of care services to vulnerable adults which enables the employee access to vulnerable adults in the course of normal duties

A person aged 18 or over is considered vulnerable if she/he has any or a combination of the following factors:

- a substantial learning or physical disability
- a physical or mental illness, chronic or otherwise
- an addiction to alcohol or drugs
- a significant reduction in physical or mental capacity

#### 3. Positions of trust

Specific posts relevant for local government are;

- solicitor
- accountant
- traffic warden/parking attendant

If you are offered a job in these categories, you will also be required to complete a further form to authorise the council to undertake a criminal record check.

#### 3. Declaration of criminal offences

Using the above guidelines, please list all your cautions and criminal offences. You must include any pending convictions and indicate that they are pending in the column 'Place and date of judgement(s)'.

If you have no convictions please write NONE and sign the form.

Your application will not be considered without completion of this section.

	Tool application will not be considered without completion of this section.				
Nature of offence(s)	Details of offence(s)	Place and date of judgement(s)	Sentence(s)		

All information given will be treated in the strictest confidence and will be used for this job application only.

I certify that, to the best of my knowledge, the information on this form is true and accurate. I understand that if the information I have supplied is false or misleading in any way, it will automatically disqualify me from appointment or may render me liable to instant dismissal without notice.

Signed - Applicant:	Date (dd/mm/yyyy):		
Name (please print)			

Diversity	/ Mor	nitoring Form	1		
Barnet Council aims to have a workforce that reflects the diversity of talent, experiences and skills of our communities.  We monitor the composition of our workforce to ensure that it is representative and that all staff are					
treated fairly. In addition, we are committed to promoting race equality, under the Race Relations (Amendment) Act 2000, which applies to everything the Council does. The information you give on this form will remain strictly confidential, in accordance with the Data Protection Act 1998, and will not affect any decision to employ you.					
Name		Job ref			
Post applied for					
			Vaa 🗆 Na 🗀		
Are you applying on a job share basis?			Yes No No		
Are you applying with a job share partner?			Yes   No		
Do you currently work for Barnet?			Yes No		
If Yes, what is your Payroll number?					
Where did you see this job advertised?			Date of Birth:	dd/mm/yyyy	
Age Under 20 20-29 30-	-39	<b>1</b> 40-49	50-59	60 and o	ver
Disability  The Disability Discrimination Act 1995 defines a disability as, 'A physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities'. In this definition, long term is taken to mean more than 12 months and would cover long term illness such as cancer and HIV or mental health problems.  Do you consider that you have a disability under the Disability Discrimination Act definition?  Yes \( \subseteq \text{No} \subseteq \)					
disability/disabilities:  Hearing (such as: deaf, partially deaf or hard of hearing)  Reduced physical capacity (such as inability to lift, carry or otherwise move everyday objects, debilitating pain and lack of strength, breath, energy or stamina, asthma, angina or diabetes)					
Vision (such as blind or fractional/partial sight. Does not include people whose visual problems can be corrected by glasses/contact lenses)		Severe disfigurer		,	
Speech (such as impairments that can cause communication problems)		Learning difficult	ies (such as dy	slexia)	
Mobility (such as wheelchair user, artificial lower limb(s), walking aids, rheumatism or arthritis)  Mental illness (substantial and lasting more than a year, such as severe depression or psychoses)					
Physical co-ordination (such as manual dexterity, muscular control, cerebral palsy)		Other disability (	olease specify)		
Declaration: I have completed the details required in this document and declare to the best of my knowledge the information given is correct. I consent to it being held on file under the terms of the Data Protection Act 1998.  Signed - Applicant:  Date (dd/mm/yyyy)					