

**Volunteer Learning Mentor Application Form**

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| **Data Protection Act**: This information is being collected for the purposes of the recruitment and selection procedures. When you complete this document you are providing your consent for the employer to hold and use personal information for these purposes. The information you provide may also be disclosed to relevant statutory bodies for their purposes. If you have a query or concern regarding this, please contact the Headteacher of the school in the first instance. Please find enclosed our staff privacy statement. |

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| --- | --- |
| Name |  |
| Age |  |
| Current college/university/ place of work |  |
| Home address |  |
| Phone number |  |
| Email address |  |
| Availability |  |

*Tell us in no more than 300 words why you would like to be a Learning Mentor and what you feel you could offer to the role*

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| [type here] |

References

Please give the names of two individuals, not related to you, who have direct knowledge of your work or study experience and from whom we may obtain references.

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| --- | --- | --- | --- | --- |
| **1st reference** | | **2nd reference** | | |
| Name |  | Name | |  |
| Company/ institution |  | Company/ institution | |  |
| Job title |  | Job title | |  |
| Relationship |  | Relationship | |  |
| Phone number |  | Phone number | |  |
| Email address |  | | Email address |  |

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| **Rehabilitation of Offenders Act 1974**  Because of the nature of the work for which you are applying this post is exempt from the provision of Section 4 (2) of the Rehabilitation of Offenders Act 1974 in accordance with the Rehabilitation of Offenders Act (Exceptional) Order 1975 as amended by the Rehabilitation of Offenders Act 1974 (Exceptions) (Amendment) Order 1986. Applicants are therefore not entitled to withhold information about convictions, cautions or bind-overs which for any other purposes are “spent” under the provisions of the Act and, in the event of employment, any failure to disclose such conviction could result in dismissal or disciplinary action by the Trust. Any information given will be completely confidential. | |
| Have you been convicted of a criminal offence in the past?  (if yes, please attach details including dates and reference numbers) | Yes/No |

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| **Data Protection Statement**  The information that you provide on this form will be used to process your application for this volunteer role. If you succeed in your application, the information will be used in the administration of your employment with us. We will check the information with third parties or with any other information held by us. We may also use or pass to third parties, information to prevent or detect crime, to protect public funds, or in other ways permitted by law. By signing this application form you are agreeing to the processing of sensitive personal data, in accordance with our registration with the Information Commissioner’s Office. If you are unsuccessful in your application with us, your application form will be destroyed after 6 months. |
| **Declaration** |
| I have read and understood the information contained in this application form. I declare that all the information provided is true and accurate to the best of my knowledge. I understand that omissions or incorrect statements will disqualify me, or if appointed, I will be liable to be dismissed. This declaration constitutes part of the terms of contract if I am appointed. I understand and agree with the Data Protection Statement above. |
| Signed (see Note below): |
| Print name |
| Date |
| Note: if you email this form to us (i.e. you can’t sign it), you will need to type your name in the ‘Signed’ fields to declare that the information on this form and your answers to the section on Rehabilitation of Offenders Act 1974 are true and accurate. |

When complete, please return your application form to [recruitment@braywickcourtschool.org.uk](mailto:recruitment@braywickcourtschool.org.uk)