Part-time Application Form for

In-Service Teacher Training

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| **Details of Course**  |
| Course Title: \* Certificate in Education (Lifelong Learning) \* Delete as required | Point of Entry(Year 1, Year 2) |
|  \* Professional Graduate Certificate in Education (Lifelong Learning)  |  |
|  \* Post Graduate Certificate in Education (Lifelong Learning)  |  |

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| **Personal Details** |
| Title Mr/Mrs/Miss/Ms | Forename |
| Male/Female | Surname |
| Address |
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| County | Postcode |
| Telephone Day | Telephone Evening |
| Mobile | Email Address |

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| **Additional Information** |
| Date of Birth |  |
| Nationality |  |
| Disclosure & Barring Service (formerly CRB)No: | Date of issue: |

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| **Ethnic Origin** |
| Please circle the description that best describes your ethnic origin |
| White | Black or Black British - Caribbean | Chinese |
| White (British) | Black or Black British - African | Mixed - White and Black Caribbean |
| White (Irish) | Other Black background | Mixed - White and Black African |
| White (Scottish) | Asian or Asian British - Indian | Mixed - White and Asian |
| White (Welsh) | Asian or Asian British - Pakistani | Other Mixed background |
| Irish Traveller | Asian or Asian British - Bangladeshi | Other ethnic background |
| Other White background | Other Asian background | Not known |

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| **Employer Details** |
| Current Employer: | Employment Commenced: |
| Address: |
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| Postcode: |
| Telephone: |
| Email: |
| Teaching/Training Duties (current or to be undertaken by the start of the course): |
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| **Qualifications** - please include details of highest relevant qualifications as per course entry requirements. Please include details of literacy and numeracy qualifications at level 2 or above. |
| DateAchieved | Course Title | AwardingBody | Level (egA Level) | Grade/Result |
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| **Disability Information** |
| Do you have a disability/medical condition/specific learning difficulty | Yes |  | No |  |
| Please circle the description that best suits the nature of your disability |
| Dyslexia | Personal Care Support | Multiple Disabilities |
| Blind/Partially Sighted | Mental Health Difficulties | Any Other Disability |
| Deaf/Hearing Impediment | Unseen Disability (e.g. Diabetes, Epilepsy) |  |
| Wheelchair User/Mobility Difficulties | Autistic Spectrum Disorder/Aspergers Syndrome |  |

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| **Personal Statement** |
| Please provide a personal statement in support of your application. For example this may include: skills, abilities, motivation, aptitudes, relevant work or voluntary experience, other prior learning and experiences, including those achieved in the workplace. How do you keep up to date with skills/knowledge required to teach your specialist subject? |

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| **Referee Details:**Your referee will typically be a current or future employer who can confirm you have the appropriate teaching hours with direct responsibilities for students (i.e. not working as a teaching assistant/support worker). |

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| **Referee Details** - please provide details of a referee to support your application |
| Name: | Telephone: |
| Address: | Email: |
|  | Occupation: |
|  | Position: |
| **Reference:**Please provide your nominated referee with the appropriate reference form. This should be completed and returned to you for submission along with this application. The form can be found at http://www.grimsby.ac.uk/documents/InserviceRefFormNew.docx |

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| **Mentor Details** - please provide details of a mentor to support the development of your subject teaching skills |
| Name: | Telephone: |
| Address: | Email: |
|  | Occupation: |
|  | Position: |

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| **Criminal Convictions** |
| Do you have any criminal conviction | Yes |  | No |  |
| You are not required to disclose details of any convictions that are deemed to be spent or motoring offences for which a fine and/or up to three penalty points were imposed at this stage, although those applying to professional training programmes for certain professions will be asked to make a further declaration at a later stage of the admission process. Applicants who tick ‘yes’ in the declaration will be contacted for further information. |
| **Declaration** |
| I confirm that to the best of my knowledge, the information given in this form is correct and complete. I understand that any offer of a place may be subject to the checking of documentary evidence to substantiate the details given in this application form.Applicant Signature: Date:  |

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| Under the Data Protection Act 1986 we need your written consent to hold and process information in relation to your application and any subsequent offer of a place for various administrative, academic and health and safety reasons. By signing the declaration at the end of the application form you give that consent. Without your consent, we regret that we will be unable to continue to process your application. |

**Please return your completed application form to: Admissions in Learner Services**

 **Grimsby Institute University Centre
 Freepost DC1284, Nuns Corner, Grimsby, DN34 5BQ**

 **Or email to: headmissions@grimsby.ac.uk**

Safeguarding Children, Young People and Vulnerable Adults

The Grimsby Institute group welcomes all applications and considers them on their individual merits. However, you are required to tell us about any convictions which are not spent under the Rehabilitation of Offenders Act (1974).For some careers you will need to declare all criminal convictions including those that are spent. Doing this will not necessarily stop you being offered a place on a course. Courses where a full disclosure is needed include those that could lead to a career in teaching or involve working with children or vulnerable adults, healthcare, the law/legal environment, accounting and finance, veterinary practices, RSPCA, taxi drivers, uniformed services and security. If you are unsure about what to declare then please seek advice from our Safeguarding team 01472 311222 Ext 1393/474 (you do not need to give your name) or ask a careers advisor at the National Careers Service at https://nationalcareersservice.direct.gov.uk/aboutus/contact us.

For further information on what spent or unspent please see the link below.

https://www.nacro.org.uk

**Please tick if you are applying for a course that will require you to disclose any criminal convictions or outstanding investigations that could lead to a criminal conviction. □**

**Please tick if you have ever been convicted of a criminal offence, have pending prosecutions or current court proceedings. □**  ¨

Please note: you do not need to tick the yes box if your criminal conviction is spent as defined by the Rehabilitation of offenders Act 1974.

If you have ticked the boxes for both of the above questions, you will need to make a full disclosure.

 Please attach the information in a separate envelope with your application form.

 If you have attached an envelope with disclosures it will be given to the Group Safeguarding Co-ordinator who will make contact and may ask you to come in for an interview to discuss. Please note that failing to complete this section or providing misleading or false information may lead to your application/enrolment being withdrawn. Ticking ‘Yes’ to any of the questions above will result in a follow up meeting in order to obtain further details. This is personal, sensitive information and we require your consent before we can process your form.