

PE & School Sport Apprenticeship Programme

Please read the accompanying recruitment pack before completing all sections of the application form. Please return forms to Beky Williams, beky@strideactive.org.

Personal Information:

Surname:	Title:	
First and Middle Name(s):		
Address:		
		Post Code:
Date of birth:		

Contact details - please give details of how you would like us to contact you:

Telephone	Home:	
	Mobile:	
Email:		
National Insurance Number		

Education and training – please provide details of all qualifications you hold, including all educational and coaching qualifications.

Name & address of institution	Subject & Grade/Functional Skill Level	Date Achieved
School:	List all including: English Language English Literature Maths	Month/Year
College:		Month/Year
University:		Month/Year
Any other relevant training/qualifications:		

Driving license	
<input type="checkbox"/> Full	<input type="checkbox"/> Provisional
<input type="checkbox"/> I have access to a car	

Employment – please provide details of your employment history, starting with your current or most recent employer. You can include voluntary or unpaid work that you may have done.

Employer name	Post held	Dates employed [from and to] and reason for leaving

Experiences – use this section to demonstrate your experience and why you would make a good apprentice.

Outline any leadership experience you have had
Detail any experience you have had of working with children and young people
When have you demonstrated the following?
<p>Responsibility:</p> <p>Communication skills:</p> <p>Initiative:</p>

Why would you like to do a PE Apprenticeship?

Please include why you have applied for the position and what you would like to achieve from it.

Preferences – please indicate which settings you would be interested in (We will use this to tailor which schools review your application prior to interviews. Whilst we try and match preferences, please note that this is not always possible)

<input type="checkbox"/> Primary	<input type="checkbox"/> Secondary	<input type="checkbox"/> Either
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References – please provide details of two people from whom we may obtain both work experience and character references.

Reference 1	Reference 2
Name:	Name:
Address:	Address:
Email Address:	Email Address:

Emergency contact details – please provide details of your next of kin (required if you are shortlisted and invited to attend an interview)

Name:	
Relationship to you:	
Phone Number	

DISCLOSURE AND BARRING SERVICE (DBS)

Schools (Employer) are legally obligated to process an enhanced Disclosure and Barring Service (DBS) check before making appointments to relevant posts.

The DBS check will reveal both spent and unspent convictions, cautions, reprimands and final warnings, and any other information held by local police that’s considered relevant to the role. Any information that is “protected” under the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 will not appear on a DBS certificate.

For posts in regulated activity, the DBS check will include a barred list check.

It is an offence to seek employment in regulated activity if you are on a barred list.

DECLARATION

I declare that the information I am giving in this application is accurate and true. I understand that providing misleading or false information may disqualify me from appointment or may result in my dismissal.

Name:**Signature:****Date:****Data Protection Notice**

All information given on this form will be treated in strict confidence. This information will be shared with schools who are part of the apprenticeship scheme and Riverside Training who are the main training provider for the programme. If you are appointed, this application will form the basis of your personal file and information on this form may be held on computer by the apprenticeship main provider, subcontractor and associate deliverers. We'll only use this data in line with data protection legislation and process your data for one or more of the following reasons permitted in law:

- You have given us your consent
- We must process it to comply with our legal obligations

If you have any queries about your data or would like your data deleted before this point, please contact hello@strideactive.org

Diversity Monitoring Form

Your Name
Job Applied For
PE and School Sport Apprentice

The following information is needed to help us ensure that our services are accessible to all. Your answers will be treated in the strictest confidence and will not be used to identify you.

Data Protection

The data collected in this form will only be used for the purpose of statistical monitoring. This information will only be retained for as long as is considered necessary for monitoring purposes and then it will be destroyed. At all times it will be kept in accordance with the Act. Please refer to the data protection notice for more information.

Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Other, please specify:
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We guarantee to interview any applicant with a disability, who meets the requirements of the post. Do you consider yourself to have a disability?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Do you have any learning difficulties, disabilities or health problems which may affect learning?

<input type="checkbox"/> Yes – please specify below (tick all that apply):	<input type="checkbox"/> No
<input type="checkbox"/> Visual impairment	<input type="checkbox"/> Autism spectrum disorder
<input type="checkbox"/> Hearing impairment	<input type="checkbox"/> Temporary disability after illness or accident
<input type="checkbox"/> Disability affecting mobility	<input type="checkbox"/> Profound complex disabilities
<input type="checkbox"/> Social and emotional difficulties	<input type="checkbox"/> Mental health difficulty
<input type="checkbox"/> Moderate learning difficulty	<input type="checkbox"/> Severe learning difficulty
<input type="checkbox"/> Dyslexia	<input type="checkbox"/> Dyscalculia
<input type="checkbox"/> Asperger’s syndrome	<input type="checkbox"/> Speech, language and communication needs
<input type="checkbox"/> Other physical disability	<input type="checkbox"/> Other disability
<input type="checkbox"/> Other medical condition (eg. epilepsy, asthma, diabetes)	<input type="checkbox"/> Other specific learning difficulty eg. dyspraxia
<input type="checkbox"/> other learning difficulty	<input type="checkbox"/> Other disability

Your sexual orientation (please tick one only):

<input type="checkbox"/> Heterosexual	<input type="checkbox"/> Gay
<input type="checkbox"/> Bisexual	<input type="checkbox"/> Lesbian
<input type="checkbox"/> Prefer not to say	

Your religion/belief (please tick one box only):

<input type="checkbox"/> Christian	<input type="checkbox"/> Muslim	<input type="checkbox"/> Jewish
<input type="checkbox"/> Hindu	<input type="checkbox"/> Sikh	<input type="checkbox"/> Buddhist
<input type="checkbox"/> None	<input type="checkbox"/> Other (please specify):	

Your ethnicity (please tick one box only):

<input type="checkbox"/> WHITE	<input type="checkbox"/> British	<input type="checkbox"/> Irish Traveller
	<input type="checkbox"/> Romany/Gypsy	
<input type="checkbox"/> Other White background (please specify):		

<input type="checkbox"/> BLACK	<input type="checkbox"/> African	<input type="checkbox"/> Caribbean
<input type="checkbox"/> Other Black background (please specify):		

<input type="checkbox"/> ASIAN	<input type="checkbox"/> Indian	<input type="checkbox"/> Pakistani
	<input type="checkbox"/> Bangladeshi	
<input type="checkbox"/> Other Asian background (please specify):		

<input type="checkbox"/> CHINESE	<input type="checkbox"/> Chinese
<input type="checkbox"/> Other Chinese background (please specify):	

<input type="checkbox"/> MIXED or mixed British	<input type="checkbox"/> White & Black African	
	<input type="checkbox"/> White & Black Caribbean	
	<input type="checkbox"/> White & Asian	<input type="checkbox"/> White & Chinese
<input type="checkbox"/> Other Mixed background (please specify):		

<input type="checkbox"/> OTHER	<input type="checkbox"/> Any other background (please specify):
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Your national identity (please tick one box only):

<input type="checkbox"/> English	<input type="checkbox"/> Scottish	<input type="checkbox"/> British
<input type="checkbox"/> Welsh	<input type="checkbox"/> Irish	<input type="checkbox"/> Other (please specify):

Where did you see this role advertised? (Please tick one box only):

<input type="checkbox"/> College/Sixth form PE department	<input type="checkbox"/> Social media
<input type="checkbox"/> College/Sixth form careers department	<input type="checkbox"/> Website (please specify)
<input type="checkbox"/> Schools recruiting an apprentice	<input type="checkbox"/> Careers Fair
<input type="checkbox"/> Riverside Training	<input type="checkbox"/> Other (please specify)