

APPLICATION FOR EMPLOYMENT AS AN EXAMINATION INVIGILATOR  
(Casual Contract Basis)

Please return completed application forms to the School,  
marked 'Examination Officer' or by email to  
recruitment@wrhs1118.co.uk

PERSONAL DETAILS

Surname: \_\_\_\_\_ First Name(s) \_\_\_\_\_  
\_\_\_\_\_

Title: Mr Mrs Miss Ms

Home Address:

\_\_\_\_\_  
\_\_\_\_\_

----- Postcode: \_\_\_\_\_

Telephone No. \_\_\_\_\_ Mobile No. \_\_\_\_\_

E-mail address: \_\_\_\_\_

N.I. Number \_\_\_\_\_  
\_\_\_\_\_

Are you legally entitled to work in the UK? YES / NO

Name and address of Current or Last Employer (please delete as appropriate)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and address of Referee \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

E-mail of Referee \_\_\_\_\_

Have you previously worked at Whalley Range High School? YES / NO

Please provide details of any work undertaken in a children and young peoples' environment

N.B. This position will be subject to safeguarding arrangements and you will, therefore, be required to undertake a DBS check. This check for disclosure of criminal history will include spent convictions, pending prosecutions/current court proceedings and police enquiries.

WHALLEY RANGE 11-18 HIGH SCHOOL  
A MEMBER OF THE EDUCATION AND LEADERSHIP TRUST

**MARITAL STATUS**

My marital status is:                      1. Single              2. Married              3. Divorced              4. Widowed              5. Other

**DISABILITY**

Do you consider yourself to be disabled?

Yes

No

If yes, please give details:

**ETHNIC ORIGIN**

Nationality (country of citizenship):

I would describe my ethnic origin as:

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> English                    | A | <input type="checkbox"/> Caribbean                  | O |
| <input type="checkbox"/> Scottish                   | B | <input type="checkbox"/> African                    | P |
| <input type="checkbox"/> Welsh                      | C | <input type="checkbox"/> Any other Black background | R |
| <input type="checkbox"/> Irish                      | D |   |   |
| <input type="checkbox"/> Any other White background | E |   |   |
| <br>  |   |   |   |
| <input type="checkbox"/> White & Black Caribbean    | F | <input type="checkbox"/> Chinese                    | S |
| <input type="checkbox"/> White & Black African      | G | <input type="checkbox"/> Any other ethnic groups    | T |
| <input type="checkbox"/> White & Asian              | H |   |   |
| <input type="checkbox"/> Any other mixed background | J |   |   |
| <br>  |   |   |   |
| <input type="checkbox"/> Indian                     | K | <input type="checkbox"/> Not stated                 | Z |
| <input type="checkbox"/> Pakistani                  | L |   |   |
| <input type="checkbox"/> Bangladeshi                | M |   |   |
| <input type="checkbox"/> Any other Asian background | N |   |   |

I give my permission for the information above to be processed in accordance with The Data Protection Act 1998.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please print name: \_\_\_\_\_