

# BOARDING TUTOR APPLICATION FORM

Please complete all sections of this application form

## PERSONAL INFORMATION

Full Name:

Date of Birth:

Current Address:

Phone Number:

Email Address:

Nationality:

Do you have the right to work in [Country]?

☐

Yes

☐

No

If yes, please provide details:

## EDUCATION AND QUALIFICATIONS

Educational Background (list institutions, dates, and qualifications):

**Teaching Qualifications (if applicable):**

**Other Relevant Qualifications or Certifications:**

## **SUBJECT SPECIALTIES**

**Please indicate the subjects you are qualified to tutor and the levels:**

**Areas of Special Expertise or Interest:**

## **EXPERIENCE**

**Previous Tutoring Experience:**

**Previous Boarding/Residential Experience:**

**Employment History (most recent first):**

AVAILABILITY

**Earliest Start Date:**

**Preferred Working Pattern:**

☐

**Full-time**

☐

**Part-time**

☐

**Evenings only**

☐

**Weekends only**

**Additional Availability Information:**

## REFERENCES

Please provide details of two professional references who can comment on your suitability for this role.

**Reference 1 - Name:**

**Position/Relationship:**

**Contact Information (email and phone):**

**Reference 2 - Name:**

**Position/Relationship:**

**Contact Information (email and phone):**

## ADDITIONAL INFORMATION

**Personal Statement (why you are interested in this position and what you can contribute):**

**Any other relevant information:**

## SAFEGUARDING DECLARATION

Due to the nature of the position for which you are applying, this position is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974.

**Have you ever been convicted of a criminal offense, or are there any pending criminal charges against you?**

☐

**Yes**

☐

**No**

**If yes, please provide details:**

**I understand that a DBS check (or equivalent) will be required prior to appointment:**

☐

**Yes, I understand**

#### **DECLARATION**

I confirm that the information provided in this application is true and complete to the best of my knowledge. I understand that any false statement or omission may result in my application being rejected or, if appointed, in disciplinary action or dismissal.

I consent to the processing of the personal data contained in this form for the purposes of recruitment and selection.

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Signature

**Date:**

*Please return the completed form to: [Contact Email/Address]*

*If you have any questions about this application, please contact: [Contact Information]*