APPLICATION FORM FOR TEACHING POST

DELETION OF ANY FIELD WILL INVALIDATE THIS APPLICATION

Applicants, please note:

- 1 If the advertisement states that electronic applications will be accepted, the Application Form should be emailed to the <u>dedicated email address</u> provided in the advertisement and only to that address.
 - If applications are required to be submitted <u>by post</u>, the Application Form must be sent to the Chairperson's address as specified in the advertisement.
- 2 The completed form must arrive at the dedicated email address/specified postal address on or before the date and time stated in the advertisement. Late applications will neither be accepted nor considered.
- 3 Canvassing will disqualify.
- 4 If completing this form in handwriting, please use **black ink.**

5 **DO NOT**

- enclose/attach a separate letter of application or
- enclose/attach a Curriculum Vitae or
- enclose/attach any certificates.

The successful candidate will be required to present original documents in relation to teaching/other qualifications prior to appointment.

	Received by:	Date:	Time:
Office use only			

APPLICANT'S PERSONAL DETAILS			
g Council			
Correspondence Address		one No	
Line 1:			
Line 2: Line 3:			
	handwritten format)		
QUALIFIC	CATION TO T	EACH AT PRIMARY L	_EVEL
n(s)	Awarding University, College or Institute		Final results received: Day/Month/Year
TEA	ACHING COU	NCIL REGISTRATION	I
n (please tick as a	ppropriate):		
(Formerly Regulat	ion 4)		
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ortfall	3	Please specify:	
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	QUALIFICATION (Please tick as a property Regulation (Formerly Regulation (Formerly Regulation) (Formerly Regul	TEACHING COUNTY In (please tick as appropriate): (Formerly Regulation 2) (Formerly Regulation 4) (Formerly Regulation 5) (Formerly Regulation 3) II Condition that has not been fulfilled to prop Programme county appropriate county appro	Mobile Phone No Landline No. E-mail Address (Please print clearly if completing in handwritten format) QUALIFICATION TO TEACH AT PRIMARY I (S) Awarding University, College or Institute TEACHING COUNCIL REGISTRATION (In (please tick as appropriate): (Formerly Regulation 2)

D== 4 11 0 0=			MOOT DECENIT FIRST
DETAILS OF	ACADEMIC G	JUALIFICATIONS -	MOST RECENT FIRST

INCLUDE UNDER-GRADUATE & POST-GRADUATE QUALIFICATIONS. PLEASE INCLUDE ANY QUALIFICATIONS IN SPECIAL EDUCATION, IF APPLICABLE. THE SUCCESSFUL CANDIDATE WILL BE ASKED TO PRESENT ORIGINAL DOCUMENTS.

Qualification & Grade	Awarding University, College or Institute	Length of Course	Final results received: Day/Month/Year

TEACHING EXPERIENCE — MOST RECENT FIRST (IF NECESSARY EXPAND THE SECTION OR USE ADDITIONAL PAGES IF COMPLETING IN HANDWRITTEN FORMAT).

*IF NEWLY QUALIFIED, PLEASE GO TO NEXT PAGE

School Name & Address	Date(s) of service in the school	Position(s) held	Dates in each Position
			From:
			То:
			From:
			То:
			From:
			То:
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All information provided in this form is confidential to the Selection Board

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School Name		Address	Pos	ition(s) h	eld	Date	es
						From:	
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IF NEWLY QUALIFIED PLE	ASE INSERT	TEACHING PRACTICE	GRADES - M	OST REC	ENT FIRS	Т	
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ADDITIONAL QUALIFICATION COLLEGE (S) OTHER RELEVANT, NON-A		Qualification and	Year	T T	To:		

All information provided in this form is confidential to the Selection Board

AREAS OF SPECIAL INTEREST - CURRICULAR/OTHER			
Area	Expertise/Experience/Specialism undertaken in College		

OTHER RELEVANT EMPLOYMENT EXPERIENCE – MOST RECENT FIRST				
Employer/Project	Position	Duties	Dates	Grade
			From:	
			То:	
			From:	
			To:	
			From:	
			To:	
			From:	
			To:	

PLEASE INDICATE HOW YOU THINK YOUR EXPERIENCE/SKILL(S) CAN ASSIST IN THIS PARTICULAR POST			
NOT MORE THAN 150 WORDS			

PLEASE INDICATE HOW YOU THINK YOU CAN CONTRIBUTE TO THE ETHOS AND SUCCESS OF THIS SCHOOL
NOT MORE THAN 150 WORDS
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ADDITIONAL INFORMATION (NOT ALREADY MENTIONED) TO SUPPORT YOUR APPLICATION NOT MORE THAN 150 WORDS
ADDITIONAL INFORMATION (NOT ALREADY MENTIONED) TO SUPPORT YOUR APPLICATION NOT MORE THAN 150 WORDS

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Name		Name	
Role		Role	
Address		Address	
Work Tel Number		Work Tel Number	
Home Tel Number		Home Tel Number	
Mobile Nr		Mobile Nr	

*Please Note:

- 1. Only those referees who know you in a professional capacity should be included. At least *three names should be provided.
- 2. Close relatives and friends should not be listed as referees.
- **3.** As it is probable that referees will have to be contacted outside of school times, it is crucial that phone numbers (preferably mobile numbers) outside of working hours, are given.
- **4.** If the current employer (*where applicable*) is not named as a referee, the Selection Board reserves the right to seek a reference from the current employer.
- **5.** The Selection Board in its sole discretion will determine the suitability of any reference. The Selection Board further reserves the right to seek from a candidate the names of additional referees.

I hereby declare that all the particulars furnished on this application form are true and correct to the best of my knowledge and that I am aware of the qualifications, requirements and particulars for this post, as set out in the advertisement and other relevant documentation.

Signature	Date
Olgitataro	Date