St. Kilian's Community School, Ballywaltrim, Bray, County Wicklow. (01)2828126 admin@stkilianscs.com



APPLICATION FOR TEACHING POSITION (2025-2026)

Position Applied For:

Candidates may re-format this Application Form, but not so as to change what is asked, or to significantly increase the form's length.

A. APPLICANT DETAILS

| Teaching Council Registration Number: | |
|--|--|
| Subjects for which you are registered: | |
| Date Of Registration: | |

| Title | Surname | First Name | | |
|--|--|-------------------------|--|--|
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| Constant Da | | | | |
| Contact De | | | | |
| Home Addr | ess: | Correspondence Address: | | |
| | | (if different) | | |
| | | | | |
| | | | | |
| | | | | |
| Email Addre | | Mobile: | | |
| | 255. | Mobile: | | |
| | | | | |
| Home Tel.: | | Work Tel.: | | |
| Are there e | | | | |
| | ny restrictions regarding your employment? | "Other Information") | | |
| (if you answer yes, please provide details on a page titled "Other Information") | | | | |
| | | | | |
| Do vou reg | uire a work permit? | | | |
| | | | | |
| Present Position/Job Title: | | | | |
| | | | | |
| Employer/Address: | | | | |
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| How much notice do you need to give your current employer? | | | | |
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B. DETAILS OF EDUCATION

QUALIFICATIONS

Grades awarded in qualifications should be stated clearly.

Second Level Education

| Leaving Cert/Equivalent (Year): | School Attended: | |
|---------------------------------|------------------|---------------|
| | | |
| Subject | Grade | Level (H/O/F) |
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Primary Degree

| University/Institute/College: | | | |
|--------------------------------|----------------|-------------------|-----------------|
| Degree Title: | | | |
| | | | |
| | | | |
| Award/Grade: | Year of Entry: | | Year Qualified: |
| (H1, H2.1 etc.) | | 1 | |
| 1 st Year Subjects: | | Final Year Subjec | ts: |
| | | | |
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P.M.E. / H.D.E. / PGCE / Equivalent

| Awarding Body: | | Qualification: | |
|------------------------|----------------|----------------|----------------|
| <u>Year of Entry</u> : | Year of Award: | | <u>Grade</u> : |

Postgraduate Qualifications

| University/Institute/College: | | | | | |
|--------------------------------|----------------|-------------------|-----------------|--|--|
| | | | | | |
| Degree/Qualification Title: | | | | | |
| | | | | | |
| Award/Grade: | Year of Entry: | | Year Qualified: | | |
| (H1, H2.1 etc.) | | | | | |
| 1 st Year Subjects: | | Final Year Subjec | ts: | | |
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Other Qualifications

| University/Institute/College: | | | |
|---|----------------|-------------------|-----------------|
| Degree/Qualification Title: | | | |
| <u>Award/Grade</u> : (H1, H2.1 etc.) | Year of Entry: | | Year Qualified: |
| 1 st Year Subjects: | | Final Year Subjec | ts: |
| | | | |
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Continuous Professional Development / Training

(List relevant in-service courses / professional development training you have received).

| CPD Course | Length of Course | Year |
|------------|------------------|------|
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C. EMPLOYMENT RECORD

Teaching Experience

Please begin with your present, or most recent employment:

| From | То | Name & Address of School | Subjects & Levels Taught | Contract Type & Hours |
|------|----|--------------------------|--------------------------|-----------------------|
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Non-Teaching Experience

| From | То | Name & Address of Employer | Position Held | Summary of Main Duties |
|------|----|----------------------------|---------------|------------------------|
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D. SUPPORTING STATEMENT

Please provide a summary of your approach to teaching and any extra-curricular activities you have organised and are willing to promote.

Additional information:

E. REFERENCES

Please provide names, positions/occupations and contact details for two people (other than relatives or friends) who may be contacted to provide professional references for you. One should be your current or most recent employer.

Please note that your referees may be contacted, without further communication with you, at any point of the selection process.

| (1) <u>Name</u> : | <u>Full Address</u> : |
|---------------------|-----------------------|
| Position/Job Title: | |
| Tel/Mobile: | <u>Email</u> : |
| (2) <u>Name</u> : | Full Address: |
| | |
| Position/Job Title: | |
| <u>Tel/Mobile</u> : | <u>Email</u> : |

F DECLARATION AND SIGNATURE

- The Selection Board may wish to check any of the details you have provided.
- Providing incorrect information or deliberately concealing any relevant facts may result in disqualification from the selection process or, where discovery is made after an appointment, in summary dismissal.
- This Application Form must be signed by the applicant.

I declare that the information supplied in this application is accurate and true.

Signed: _____

Date: _____

- Completed Application Forms should be sent by email to <u>admin@stkilianscs.com</u> for the attention of *The Secretary to the Board of Management* <u>or</u> by post to The Secretary to the Board of Management, St. Kilian's Community School, Ballywaltrim, Bray, County Wicklow, to arrive no later than Friday, May 2nd 2025 at 2.00 pm.
 - Canvassing will disqualify.

PLEASE NOTE: If you are awaiting confirmation of registration with the Teaching Council, please insert "Pending" in the Teacher Registration Number section of this application form. Any offer of employment will be conditional on registration with the Teaching Council and subject to the satisfactory outcome of the Garda vetting process.