



Holy Faith Secondary
School: D03 R528
T: 01 8332754
E: admin@holyfaithclontarf.com
W: www.holyfaithclontarf.com
Roll no: 60750J

TEACHER APPLICATION FORM

POST FOR WHICH YOU ARE APPLYING: _____

| Details | |
|------------------|--|
| Name | |
| Address | |
| Mobile Telephone | |
| Email | |

| Teaching Council Registration Details | |
|---|----------|
| Are you registered with the Teaching Council? | YES: NO: |
| What is your Teaching Registration Council number? | |
| Please list your subjects registered with the Teaching Council. | List: |

1. Education Record

Third Level Qualifications:

| Dates | College | Qualifications Level | Results (or expected) (e.g. 2.1) |
|-------|---------|----------------------|----------------------------------|
| | | | |
| | | | |
| | | | |

Teacher Education Qualifications:

| Dates | University/College | Examination Results (incl. teaching practice) |
|-------|--------------------|---|
| | | |

2. Additional Professional Qualifications (Certificates/Diplomas or Training)

| |
|--|
| |
|--|

3. Teaching experience to-date

| Dates From | Date To | Subjects taught and to what level | School/College/Organisation |
|-------------------|----------------|--|------------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

4. Other relevant experience to-date

| Dates From | Date To | Employer | Position | Duties |
|-------------------|----------------|-----------------|-----------------|---------------|
| | | | | |
| | | | | |
| | | | | |

5. Professional

5.1 List in-service courses taken (with dates) including the length of these courses and where appropriate the certification obtained:

| Date | Course | Location |
|------|--------|----------|
| a) | | |
| b) | | |
| c) | | |
| d) | | |

6. Extra-curricular activities with which you have been and/or would be prepared to be involved?

Please outline:

7. Any other relevant information:

Please outline:

8. PERSONAL DECLARATION:

If this section is not completed, your application will not be considered for processing.

8.1 Have you been investigated by the Gardaí, HSE, or your employer in relation to substantiated complaints made concerning your treatment of children?

YES

NO

8.2 Were you the subject of any allegation of criminal conduct or wrongdoing towards a minor?

YES

NO

9. Please supply the name and address of two referees

Please give two referees. Please ensure that the referees you provide are from a professional perspective. We retain the right to contact current and all previous employers.

| Name | Address | Mobile Number | Position |
|------|---------|---------------|----------|
| | | | |
| | | | |

The post for which you are applying is subject to the Director of Redeployment agreeing to the post being filled following the completion of the 2024 scheme

The Board of Management of this school is an equal opportunities employer
Shortlisting will apply and only candidates that have been shortlisted will be contacted.

I certify to the Board of Management of Holy Faith Secondary School, Clontarf, that the information provided in this application is true and correct.

Signature of Applicant..... Date.....

This form should be emailed to admin@holyfaithclontarf.com

Please clearly state in the email which position that you are applying

for. Closing date: *14th March 2025*