



**SACRED HEART SECONDARY SCHOOL,
Drogheda**

Board of Management

APPLICATION FORM FOR TEACHING POST

DELETION OF ANY FIELD WILL INVALIDATE THIS APPLICATION

Applicants, please note:

- 1 The Application Form should be emailed to the *dedicated email address* provided in the advertisement and *only* to that address.
- 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. The successful candidate will be required to present original documents in relation to teaching/other qualifications prior to appointment.

POSITION ADVERTISED:

**Application Form
for a Fixed Term **Irish & Geography** teaching post**

This is a fixed term teaching post funded by monies from the Oireachtas.

SCHOOL SACRED HEART SECONDARY SCHOOL, DROGHEDA

ROLL NUMBER 63860I

Office use only	Received by:	Date:	Time:
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APPLICANT'S PERSONAL DETAILS

Name (as per Teaching Council Register)		
Correspondence Address	Mobile Phone No.	
Line 1:	Landline No.	
Line 2:	E-mail Address <i>(Please print clearly if completing in handwritten format)</i>	
Line 3:		
Eircode		

QUALIFICATION TO TEACH AT POST PRIMARY LEVEL

Qualification(s)	Awarding University, College or Institute	Final results received: Day/Month/Year

TEACHING COUNCIL REGISTRATION

Registration Number _____

Registered under Regulation *(please tick as appropriate):*

- Route 1 Primary ☐
- Route 2 Post Primary ☐
- Route 3 Further Education ☐
- Route 4 Other ☐

Registration Status: Full ☐ Conditional ☐

If conditional, please tick the condition that has not been fulfilled and indicate the expiry date by which each condition must be met:

- | | |
|--|-----------------------|
| Condition 1: Droichead/Probation <input type="checkbox"/> | Expiry Date: _____ |
| Condition 2: Induction Workshop Programme <input type="checkbox"/> | Expiry Date: _____ |
| Condition 3: Irish Language Requirement <input type="checkbox"/> | Expiry Date: _____ |
| Condition 4: Qualification Shortfall <input type="checkbox"/> | Please specify: _____ |
| | Expiry Date: _____ |

DETAILS OF ACADEMIC QUALIFICATIONS – MOST RECENT FIRST

INCLUDE **LEAVING CERTIFICATE/A LEVELS, 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: 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) & responsibilities held. State teaching groups.	Dates in each Position
			From: To:
			From: To:
			From: To:
			From: To:
			From:

			To:
POST(S) OF RESPONSIBILITY HELD (IF ANY) – MOST RECENT FIRST			
School Name	Address	Position(s) held	Dates
			From: To:
			From: To:

*IF NEWLY QUALIFIED PLEASE INSERT TEACHING PRACTICE GRADES – MOST RECENT FIRST				
School Name	Address	Class taught	Dates	Grade
			From: To:	
			From: To:	
			From: To:	
			From: To:	

ADDITIONAL QUALIFICATIONS E.G. ICT, CERTIFICATE TO TEACH RELIGION (IF APPLICABLE)		
College(s)	Qualification and Year	Modules Studied

OTHER RELEVANT, NON-ACCREDITED COURSES OR EXPERIENCES – MOST RECENT FIRST

PLEASE INDICATE HOW YOU THINK YOU CAN CONTRIBUTE TO THE ETHOS AND SUCCESS OF THIS SCHOOL
NOT MORE THAN 150 WORDS

ADDITIONAL INFORMATION (NOT ALREADY MENTIONED) TO SUPPORT YOUR APPLICATION
NOT MORE THAN 150 WORDS

Personal Declaration:

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

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

YES ☐

NO ☐

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

YES ☐

NO ☐

Are you aware of any material circumstance in respect of your own conduct which touched/touches on the welfare of a minor?

YES ☐

NO ☐

The school undertakes that all responses furnished by you in respect of the above questions will be treated as confidential, subject to any reporting obligations which may be imposed on the school, pursuant to "Children First" published by the Department of Children and Youth Affairs, the Child Protection Procedures for Primary and Post Primary Schools published by the Department of Education and Skills or pursuant to any legal obligation imposed on the school to facilitate the effective investigation of crime.

In the event of your being recommended for appointment to this position the Board of Management is obliged to comply with the terms of current DES Circular Letters. The Board of Management's policy is that all new personnel recommended for appointment will be vetted and that the outcome of the vetting will be considered having regard to the school's vetting policy.

This applies in respect of all recommendations for appointment to teaching, principal, deputy principal and support staff positions where the person recommended for appointment is not currently an employee of the school and applies irrespective of whether the person has been previously vetted or not.

Please note that appointment to the position is subject to the outcome of the vetting process and the Board of Management's determination of suitability for employment in the position having regard to the vetting information received. No appointment will be confirmed until the aforementioned steps have been completed.

Further note that it is essential that you make appropriate and full disclosure in response to the questions above. In the event of an offer of employment being made to you by the board of management, this personal declaration will constitute a fundamental term of the contract of employment. If, at any time, it is subsequently established that you have made an incomplete and/or inaccurate disclosure in this declaration, you may face disciplinary action, up to and including dismissal.

NAMES & CONTACT DETAILS OF REFEREES*			
Referee 1		Referee 2	
Name		Name	
Role		Role	
Address		Address	
Work Tel Number		Work Tel Number	
Home Tel Number		Home Tel Number	
Mobile No.		Mobile No.	
Referee 3		Referee 4	
Name		Name	
Role		Role	
Address		Address	
Work Tel Number		Work Tel Number	
Home Tel Number		Home Tel Number	
Mobile No.		Mobile No.	

***Please Note:**

Only those referees who know you in a professional capacity should be included. At least three names should be provided.

Close relatives and friends **should not** be listed as referees.

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.

If the current employer (*where applicable*) is not named as a referee, the Interview Board reserves the right to seek a reference from the current employer.

The Interview Board in its sole discretion will determine the suitability of any reference. The Interview 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,

The Board of Management of this school is an equal opportunities employer. Shortlisting of candidates may take place. *This position is subject to the post not being required for the redeployment process.*

Signature _____

Date _____

Please return by email to: appointments@sacredheart.ie

Closing date: Wednesday 11th June