



# **APPLICATION FORM FOR A TEACHING POSITION**

## Teaching Post(s) applied for:

Teaching	Teaching Post(s) Title(s)					
Have you p	reviously applied for a	position at Mayfield	Community S	chool?		
Yes	No	If Yes, state	e year of appli	cation:		
Were you s	hortlisted and intervie	wed? Yes		No 🔲		
A. APP	LICANT DETAILS					
	EGISTRATION NUMBER	R:				
DATE OF RE	GISTRATION:					
Have you been vetted via the Garda Central Vetting Unit: Yes No						
If yes, state when: Year						
If yes, state	when: Year	_				
If yes, state Title	when: Year Surname	_	First Name			
		_				
Title	Surname	_				
Title Contact Det	Surname		First Name	, ,		
Title	Surname			, ,		
Title Contact Det	Surname		First Name	, ,		
Title Contact Det	Surname		First Name	, ,		
Title Contact Det	Surname		First Name	, ,		
Title Contact Det	Surname		First Name	, ,		
Title Contact Det Home Addr Home Tel: Email Addre	Surname tails ess	Co (ij Work Tel:	First Name	Address		
Title Contact Det Home Addr Home Tel: Email Addre	Surname tails ess	Co (ij Work Tel:	First Name	Address		

Do you require a work permit?

Present Position/Job Title:

Employer/Address:

How much notice do you need to give your current employer?

#### B. EDUCATIONAL DETAILS

#### QUALIFICATIONS

## Second Level Education

Leaving Cert/equivalent Year:		School Attended	:
Subject	Grade		Hons/Ord

#### Primary Degree

University/Institute/College:				
Degree Title				
Award/Grade (Hons/Pass)		Year of Entry:		Year Qualified:
1 <sup>st</sup> Year Subjects		Final Year Subjects		

# H.D.E./P.G.C.E./P.M.E./ Equivalent

Awarding Body:	
Year of Award/Grade:	

# Postgraduate Qualifications

University/Institute/College:			
Degree Title			
Award/Grade (Hons/Pass)	Year of Entry:		Year Qualified:
1 <sup>st</sup> Year Subjects		Final Year Subjects	

# **Other Qualifications**

University/Institute/College:				
Degree Title				
Award/Grade (Hons/Pass)		Year of Entry:		Year Qualified:
1 <sup>st</sup> Year Subjects		Final Year Subjects		

## **In-service Courses/Training** (List any in-service courses/training you have received)

In-Service Training Course	Length of Course	Year

#### C. EMPLOYMENT RECORD

# **TEACHING EXPERIENCE (please begin with your present, or most recent employment)**

Name & Address Of School	Date From	Date To	Contract Type PWT/TWT/ PRPT	If Pro-rata part-time, timetabled hrs per wk	Subjects Taught	Level

#### NON-TEACHING EXPERIENCE

Dates (From/To)	Name & Address of Employer	Position Held	Summary of Main Duties

#### D. SUPPORTING STATEMENT

This section is for you to provide a summary of your teaching experience (teaching profile) – your approach to teaching and any extra-curricular activities you have organised and are willing to promote.

Additional Information:

#### E. REFERENCES

Please provide names, addresses and position/occupation of two people (other than relatives or friends) with knowledge of you and your work from whom a professional reference can be sought. One should be your current or most recent employer.

Please note: your referees may be contacted without further communication with you and prior to selection interview if shortlisted.

1. Name:	Full Address:
Position/Job Title:	
Tel/Mobile:	Email:
2. Name:	Full Address:
Position/Job Title:	
Tel/Mobile:	Email:

#### F. DECLARATION AND SIGNATURE

- Please sign the form below, certifying that all information you have provided is accurate
- The Committee may wish to check any of the details you have provided

Providing incorrect information or deliberately concealing any relevant facts may result in qualification from the selection process or, where discovery is made after an appointment, in summary dismissal.

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

Signed:\_\_\_\_\_ Date:\_\_\_\_\_

Completed application forms should be sent to *The Secretary, Board of Management, Mayfield Community School, Old Youghal Road, Mayfield, Cork by* **Wednesday 29**<sup>th</sup> **May at 12.00 noon**.

## Applications will not be accepted by fax/email

**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.