

- 1. Ensure that you complete ALL sections of this form in full.
- 2. Once completed, save the form in Word format using your main teaching subject and name as the new file name eg Irish John Murphy
- 3. Email the form as an attachment to recruitment@celbridgecs.ie In the Subject Box of your email please type the subject you are applying for. Postal applications will not be considered.
- 4. You should receive a brief acknowledgement by email within 48 hours. If you do not, please contact the school immediately at recruitment@celbridgecs.ie. Also, check your junk mail or spam folder. Due to the volume of applications, only shortlisted candidates will receive further contact.
- 5. The information that you provide on this form will be handled and stored in accordance with current Data Protection legislation. Except for the successful candidate, all records from the recruitment process will be held electronically for six months, after which time they will be permanently deleted.
- 6. Your application will be assessed on the information you submit on the official application form. Please ensure all sections are completed fully and accurately, giving clear evidence of qualifications, skills and experience.
- 7. No late applications will be accepted.



Teaching	Post/s Ap	plied for:	
Α.	APPLICA	NT DETAILS	
TEACHE	R REGIST	RATION NUMBER:	
DATE O	F REGISTR	RATION:	
SUBJEC	TS REGIST	TERED TO TEACH:	
•		red via the Garda Central Year	-
Title	Surnam	e	First Name
Contact	Details:		
Home A	ddress:		Correspondence Address
			(if different)
Home Te	el.:	Mobile:	
Email Ad	ddress:		
Are ther	e any restri	ctions regarding your em	ployment?
(if you a	nswer yes,	please provided details o	n a page titled "Other Information")
Present	Position/Job	Title:	
Employe	er/Address:		



B. EDUCATIONAL DETAILS

Second Level Education

Leaving Cert/equivalen	t School Atte	ended:	
Year:			
Subject	Grade		Hons/Ord
			·
Primary Degree			
Primary Degree			
University/Institute/Col	llege:		
Degree Title			
Award/Grade	Year of E	ntry:	Year Qualified
1 st Voor Cubioctor		Final Va	var Cubicata
1 st Year Subjects:		Fillal Te	ear Subjects
P.M.E. / PGCE / Eq	<u>uivalent</u>		
Awarding Body:			
Year of Entry:		Year of	Award/Grade:



Postgraduate Oualifications

University/Institute/	College:			
Degree Title				
Award/Grade		Year of Ent	ry:	Year Qualified
(Hons/Pass)				
1 st Year Subjects:			Final Year S	Subjects

Other Oualifications:

University/Institute/	'College:			
Degree Title				
Award/Grade		Year of Entr	y:	Year Qualified
1 st Year Subjects:			Final Year S	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 more recent employment:

NAME & ADDRESS OF SCHOOL	Dat From	To	CONTRACT TYPE	If Pro-rata part-time- Timetabled hrs per week	Subjects Taught	Level

Note: T/P = Teaching practice P/T - Part-time PRPT = Pro-rata Part-time

TWT = Temporary Wholetime CID = Contract of Indefinite Duration PWT = Permanent Whole-time

SUBJECTS AND LEVELS TAUGHT

Subject Details (Please specify subjects taught during last 3 years only – tick as appropriate and indicate length of time)	LC H	LC O	JC	TY	LCA	JSCP	SEN	Team Teaching
Subject 1:								
Indicate number of years/ months→								
Subject 2:								
Indicate number of years/ months→								
Subject 3:								
Indicate number of years/ months→								



Non Teaching Experience

Dates	Name & Address of Employer	Position Held	Summary of Main Duties



D. SUPPORTING STATEMENT

is section i	is for you to pro	vide: Maximum 2	250 words per	section		
A summa	ry of your tead	ching experienc	ce and your a	pproach to lear	ning & teachin	g.
		ling of how mol				
utline de ses an in	etails and asso	ciated example platform to sup	s of a classro	om resource th	at you have cr rning & teachi	eated, whi
utline de ses an in	etails and asso	ciated example platform to sup	s of a classro port your visi	om resource th on for good lea	at you have cr rning & teachi	eated, whi ng.
utline de ses an in	etails and asso	ciated example platform to sup	s of a classro port your visi	om resource th on for good lea	at you have cr rning & teachi	eated, wh



to introduc	e in Celbridge C	ommunity Scho	ol.	·	y & that you wo
Vhat is your ool? How de	understanding you see yourse	of the characte elf supporting tl	ristic spirit, visio ne school as it ev	n and ethos of Ce olves in this rega	lbridge Commu rd?



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 <u>prior</u> to selection interview if shortlisted for interview.

Name: Position/Job title:	Full Address:
Tel/Mobile:	Email
Name:	Full Address:
Position/Job title:	
Tel/Mobile:	Email:



F DECLARATION

Declarations

If this section is not completed, your application will not be consi	ider	ere	Æ	e	Ε	ε	ŧ	ε	E	ε	(٠,	r	r	r	r	Ì	1	١	1	1	1	Ì	r	r	r	r	r	r	r	r	r	r	r	r	r	r	r	r	r	r	Ì	1	1	١	١	١	3	2	2	Ξ	ĉ	E	e	(ı	t	d	C	(İ	j	S	9	ľ	١	r	r	۱	כ	C	()	C	(3	e)(b	١	Ē	t)	C	1	n	1	ı	ı	ı	i	/i	۷	٧	١	1	10	C	İ١	ti	t	3.	ĉ	C	i	li	١c	0	ľ)	ır	a	ć	r	ır	J	ι)	C	V	١		t	d	(9	e	(t	1	9	e	le	١)	0	ľ	۱	n	۲	n	r	ı)	٥
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F.1	I have read the <i>Guidelines for Completing the Teaching Position Application Form</i> . I understand that I will receive an email confirmation within 48 hours of submitting this application and that it is my responsibility to keep this proof of application or to contact the School if it isn't received. (Yes/No)
Child Protection	
F.2	Have you ever been investigated by the Gardai, HSE or an employer in relation to substantiated complaints made concerning your treatment of children? (Yes/No)
F.3	Have you ever been the subject of any allegation of criminal conduct or wrongdoing towards a minor? (Yes/No)
F.4	Are you aware of any material circumstance in respect of your own conduct which touched/touches on the welfare of a minor? (Yes/No)
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 Child Protection legislation and procedures. The Board of Management's policy is that all newly appointed teachers and support staff will be vetted and that the outcome of the vetting will be considered in the light of the School's vetting policy. This applies irrespective of whether the individual has been previously vetted or not.	
Authenticity of this application	
F.5	I certify that the information provided herewith is true and correct.
	(Yes/No)
applic	I understand that should any of the information provided in this application be found to be or inaccurate in any material way, the Board of Management reserves the right to disqualify this ation or withdraw any offer of employment made. I also note that if the Board of Management in the future, that I have made an incomplete or inaccurate disclosure, I may face inary action, up to and including dismissal. (Yes/No)
Sig	ned:
Dat	re:



Completed application forms should be emailed to: recruitment@celbridgecs.ie
Application closing date is 4pm on Wednesday, 6th August 2025.

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.