APPLICATION FORM FOR PRIMARY PRINCIPALSHIP

DELETION OF ANY FIELD WILL INVALIDATE THIS APPLICATION

Applicants, please note:

1 If the advertisement states that electronic applications will be accepted, the Application Form should be emailed to the <u>dedicated email address</u> provided in the advertisement and only to that address.

If applications are required to be submitted <u>by post</u>, the Application Form must be sent to the Chairperson's address as specified in the advertisement.

- 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 **DO NOT**

- enclose/attach a separate letter of application or
- enclose/attach a Curriculum Vitae or
- enclose/attach any certificates.

The successful candidate will be required to present original documents in relation to teaching/other qualifications prior to appointment.

For 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			
	Landline No.			
		E-mail Address		
	(Please print clearly if completing in handwritten format)			
Total length of accredited service as primary teacher in Ireland	a	Total length of accredited service as a primary teacher in other jurisdictions		
		TEACH AT PRIMARY LE		
Qualification(s)	Awarding Un Institute	niversity, College or	Final results received: Day/Month/Year	
	TEACHING CO	UNCIL REGISTRATION		
Registration Number:				
Registered under Regulation (plea	se tick as appı	ropriate):		
Regulation 2 (Primary)				
Regulation 3 (Montessori and Other	Categories)			
Regulation 4 (Post-primary)				
Regulation 5 (Further Education				
Registration Status: Full				
If conditional, please state the condition(s) and the date by which each condition must be met:				
Condition 1:	Expiry Date:			
Condition 2:	Expiry Date:			
Condition 3:	Expiry Date:			
Pending: If pending, please state the date of submission of application:				
Have you completed the registration condition of Probation? Yes ☐ No ☐				
If yes in what setting? Mainstream ☐ Restricted ☐				

DETAILS OF ACADEMIC QU	ALIFICAT	IONS - MOST RECEN	NT FIRST		
INCLUDE UNDER- GRADUATE & PO	OST-GRADUA	T			RESENT ORIGINAL DOCUMENTS Final results received:
Qualification		Awarding University, College or Institute		Length of Course	Day/Month/Year
TEACHING EXPERIENCE - MC HANDWRITTEN FORMAT).	OST RECENT	FIRST (IF NECESSARY EX	PAND THE SECTION OF	R USE ADDITIONAL P.	AGES IF COMPLETING IN
School Name & Address		of service ne school	Positi	ion(s) held	Dates
					From: To:
					From: To:
					From:
					To:
					From:
					То:
					From:
					То:
Post(s) of Responsibility	TY HELD ((IF ANY) – MOST RECI	ENT FIRST		
School Name		Address	Posi	ition(s) held	Dates
					From: To:
					From: To:
					From: To:

From: To:

ADDITIONAL QUALIFICATIONS E.G. IC	CT, SEN, CERTIF	ICATE TO TEACH I	RELIGION (IF APPLICABLE)
College(s)	Qualification	Year of Award	Modules Studied
OTHER RELEVANT, NON-ACCREDITED	O COURSES - MOS	T RECENT FIRST:	
Course Provider	Duration and	Year of Study	Modules Studied
PLEASE PROVIDE A BROAD OVERVIEW SCHOOL CONTEXT (150 WORDS APPL		RIENCE OR KNOW	LEDGE OF THE ROLE OF MANAGEMENT IN A

	REPARATION YOU HAVE UNDERTAKEN WITHIN THE LAST FIVE YEARS TO PREPARE YOU DFESSIONAL DEVELOPMENT / IN-SERVICE OR OTHER FORMS OF PREPARATION)
18	
DESCRIBE WHAT YOU BE	LIEVE TO BE THE CHARACTERISTICS OF AN EFFECTIVE SCHOOL

Position Advertised	SCHOOL	ROLL NR.
WHAT STRENGTHS OR QUALITIES WOULD YOU BRING TO THIS PARTICULAR POST?		
WHAT DO YOU REGARD AS THE KEY ISSUES II PRINCIPAL?	N EDUCATION AND HOW DO THESE IMPACT ON	THE ROLE OF
WHY HAVE YOU APPLIED TO BECOME PRINCIF	PAL OF THIS PARTICULAR SCHOOL?	
WIT HAVE TOO AT LIED TO BESOME TRINGS	AL OF THIS PARTICULAR GOTTOGE.	

AREAS OF SPECIAL INTEREST - CORRICULAR /OTHER			
Area		Expertise/Experience	
OTHER RELEVANT EMPLOYMENT E	EXPERIENCE - MOST RECENT	FIRST	
Employer/Project	Position	Duties	Dates
			From: To:
ADDITIONAL INFORMATION (NOT ALREADY MENTIONED) TO SUPPORT YOUR APPLICATION.			
All informatio	n nuovidad in this farm is so	nfidential to the Selection Bos	d

Names & Contact Details of Referees*			
	Reference 1		Reference 2
Name		Name	
Role		Role	
Address		Address	
Work Tel Number		Work Tel Number	
Home Tel Number		Home Tel Number	
Mobile Number		Mobile Number	
	Reference 3		Reference 4
Name		Name	
Role		Role	
Address		Address	
Work Tel Number		Work Tel Number	
Home Tel Number		Home Tel Number	
Mobile Number		Mobile Number	

*Please Note:

- 1. Only those referees who know you in a professional capacity should be included. At least three names should be provided.
- 2. Close relatives and friends should not be listed as referees.
- **3.** 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.
- **4.** If the current employer (*where applicable*) is not named as a referee, the Selection Board reserves the right to seek a reference from the current employer.
- **5.** The Selection Board in its sole discretion will determine the suitability of any reference. The Selection 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.

Signature	Date
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