# **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 <u>only to that address</u>.
  - 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.

|                     | Received by: | Date: | Time: |
|---------------------|--------------|-------|-------|
| For office use only |              |       |       |

| APPLICANT'S PERSONAL DETAILS   |                  |   |                       |          |
|--|------------------|---|-----------------------|----------|
| Name (as per Teaching Council<br>Register)                               |                  |   |                       |          |
| Correspondence Address   |                  | Mobile Phone No                                   |                       |          |
|  |                  | Landline No.                                      |                       |          |
|  |                  | E-mail Address (Please                            |                       |          |
|  |                  | print clearly if completing in                    |                       |          |
|  |                  | handwritten format)                               |                       | <u> </u> |
| Total length of accredited service as a<br>primary teacher in Ireland    |                  | Total length of accredit primary teacher in other |                       |          |
| primary teacher in reland  |                  | primary teacher in other                          | jui isuictions        |          |
|  |                  |   |                       |          |
|  |                  |   |                       |          |
|  | QUALIFICATION T  | O TEACH AT PRIMARY LEVEL                          |                       |          |
| Qualification(s)   | Awarding Ui      | niversity, College or                             | Final results Day/Mor |          |
|  |                  |   | <i>2,</i> ,           | ,        |
|  |                  |   |                       |          |
|  | TEACHING C       | COUNCIL REGISTRATION                              |                       |          |
| Registration Number:   |                  |   |                       |          |
|  |                  |   |                       |          |
| Registered under Regulation (please tick as a                            | appropriate):    | _   |                       |          |
| Regulation 2 (Primary)   |                  | _   |                       |          |
| Regulation 3 (Montessori and Other Categori                              | es)              | _   |                       |          |
| Regulation 4 (Post-primary)  |                  | _   |                       |          |
| Regulation 5 (Further Education  |                  |   |                       |          |
| Registration Status: Full  | Conditional      |   |                       |          |
| If conditional, please state the condition(s) ar                         | nd the date by w | hich each condition must l                        | be met:               |          |
| Condition 1:   | Expiry D         | Oate:   |                       |          |
| Condition 2:   | Expiry D         | Oate:   |                       |          |
| Condition 3:   | Expiry D         | 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 QUALIFICATION INCLUDE UNDER- GRADUATE & P |                |  | CESSFUL CANDIDAT  | E WILL BE ASKED TO PRESE | ENT ORIGINAL DOCUMENTS                    |
|---|----------------|--|-------------------|--------------------------|---|
| Qualification   |                | Awarding University, College or<br>Institute |                   | Length of<br>Course      | Final results received:<br>Day/Month/Year |
|   |                |  |                   |                          |   |
|   |                |  |                   |                          |   |
|   |                |  |                   |                          |   |
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|   |                |  |                   |                          |   |
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|   |                |  |                   |                          |   |
| TEACHING EXPERIENCE - MOST RECEN                              | T FIRST (IF NI | ECESSARY EXPAND THE SECTION                  | N OR USE ADDITION | AL PAGES IF COMPLETING   | IN HANDWRITTEN FORMAT).                   |
| School Name &<br>Address                                      |                | s of service<br>he school                    | Posit             | ion(s) held              | Dates                                     |
| 7. <b></b>  |                |  |                   |                          | From:                                     |
|   |                |  |                   |                          | То:                                       |
|   |                |  |                   |                          | From:                                     |
|   |                |  |                   |                          | То:                                       |
|   |                |  |                   |                          | From:<br>To:                              |
|   |                |  |                   |                          |   |
|   |                |  |                   |                          | From:<br>To:                              |
|   |                |  |                   |                          | From:                                     |
|   |                |  |                   |                          | To:                                       |
| Post(s) of Responsibility Held (#                             | ANY) – Mo      | ST RECENT FIRST                              |                   |                          |   |
| School Name   |                | Address                                      | Pos               | sition(s) held           | Dates                                     |
|   |                |  |                   |                          | From:                                     |
|   |                |  |                   |                          | То:                                       |
|   |                |  |                   |                          | From:<br>To:                              |
|   |                |  |                   |                          | From:<br>To:                              |
|   |                |  |                   |                          | From:<br>To:                              |

| ADDITIONAL QUALIFICATIONS E.G. ICT, SEN, CERTIFICATE TO TEACH RELIGION (IF APPLICABLE) |                     |                      |   |  |
|--|---------------------|----------------------|---|--|
| College(s)   | Qualification       | Year of Award        | Modules Studied                         |  |
|  |                     |                      |   |  |
|  |                     |                      |   |  |
|  |                     |                      |   |  |
| OTHER RELEVANT, NON-ACCREDITED COURSES — N   | MOST RECENT FIRST:  |                      |   |  |
| Course Provider  | Duration and        | Year of Study        | Modules Studied                         |  |
|  |                     |                      |   |  |
|  |                     |                      |   |  |
|  |                     |                      |   |  |
| PLEASE PROVIDE A BROAD OVERVIEW OF YOUR EX   | PERIENCE OR KNOWLED | GE OF THE ROLE OF MA | NAGEMENT IN A SCHOOL CONTEXT (150 WORDS |  |
|  |                     |                      |   |  |
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| PLEASE OUTLINE ANY PREPARATION YOU HAVE UNDERTAKEN WITHIN THE LAST FIVE YEARS TO PREPARE YOU FOR PRINCIPALSHIP (PROFESSIONAL DEVELOPMENT / IN-SERVICE OR OTHER FORMS OF PREPARATION)  (150 WORDS APPROX.) |
|---|
| 1230 WORDS AFFROXI)   |
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| DESCRIBE WHAT YOU BELIEVE TO BE THE CHARACTERISTICS OF AN EFFECTIVE SCHOOL  |
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| DESCRIBE WHAT YOU BELIEVE TO BE THE CHARACTERISTICS OF AN EFFECTIVE PRINCIPAL |  |  |  |
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| WHAT IS YOUR PERSONAL VISION FOR THE ROLE OF PRINCIPAL IN A SCHOOL?           |  |  |  |
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| WHAT STRENGTHS OR QUALITIES WOULD YOU BRING TO THIS PARTICULAR POST?                                |  |  |  |
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| WHAT DO YOU REGARD AS THE KEY ISSUES IN EDUCATION AND HOW DO THESE IMPACT ON THE ROLE OF PRINCIPAL? |  |  |  |
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| WHY HAVE YOU APPLIED TO BECOME PRINCIPAL OF THIS PARTICULAR SCHOOL?                                 |  |  |  |
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| ARE AREAS OF SPECIAL INTEREST — CURRICULAR / OTHER |                             |                      |       |  |
|--|-----------------------------|----------------------|-------|--|
| Area   |                             | Expertise/Experience |       |  |
|  |                             |                      |       |  |
|  |                             |                      |       |  |
|  |                             |                      |       |  |
|  |                             |                      |       |  |
|  |                             |                      |       |  |
| OTHER RELEVANT EMPLOYMENT EXPERIENCE -             | MOST RECENT FIRST           |                      |       |  |
| Employer/Project                                   | Position                    | Duties               | Dates |  |
|  |                             |                      | From: |  |
|  |                             |                      | То:   |  |
|  |                             |                      | From: |  |
|  |                             |                      | То:   |  |
|  |                             |                      | From: |  |
|  |                             |                      | То:   |  |
|  |                             |                      | From: |  |
|  |                             |                      | То:   |  |
| ADDITIONAL INFORMATION (NOT ALREADY MEI            | NTIONED) TO SUPPORT YOUR AP | PLICATION.           |       |  |
|  |                             |                      |       |  |
|  |                             |                      |       |  |
|  |                             |                      |       |  |
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|  |                             |                      |       |  |
|  |                             |                      |       |  |

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