### Please note:

This form must be signed. All questions must be answered.

Do not change the question numbers or sequence.

No letter of application, CV or written reference should accompany this form.

Office use only	
Date Received:	

### **APPLICATION FOR TEACHING POSITION**

## 1. PERSONAL DETAILS

First Name:		Surname:		
Home Address:		Correspondence Address: (if different)		
Home Phone Num	ber:	Mobile Phone Number:		
Email Address:				
Are there any restrictions regarding your employs (if you answer Yes, please provide details on seg			Yes No [	
Do you require a Work Permit?			Yes No	
Are you registered with the Teaching Council?			Yes No	
If YES, Teaching Council Registration Number:				
If NO, are you eligible for registration and willing		to register?		
Please note that the successful candidate will be paid by DES and will have to fulfill DES conditions include registration with the Teaching Council.			litions which	

# 2. PRESENT POSITION

Please give details of your current position:

Employer:	Address:		Job Title:				
How much notice do you need to	How much notice do you need to give						
your current employer?							
3. QUALIFICATIONS							
3.1 Second Level Education							
Leaving Certificate/Equivalent							
Year							
School attended:							
Subject		G	rade	Hons/Ord			
3.2 Primary Degrees/Diplomas:							
University/Institute/College:							
Qualification (Hons/Pass):		Awarding Body:					
Year of Entry: Year Qualified:							
Subjects studied:							
First Year Subjects		Final Year	Subjects				

3.3 PGDE / HDIP / Equivale	nt):			
University/Institute/College:				
Qualification:		Awarding Boo	dy:	
Year of Entry:		Year Qualifie	d:	
Subjects studied:				
3.4 Post graduate Qualifica	ations			
University/Institute/College:				
Qualification:		Awarding Body		
3.5 In-Service Courses/Tra	ning you have received. P	lease include da	ates of the relevant training a	and duration of
these courses. Start with the management of Course	Name of Organisation running cou	on/Institution	Length of Course	Year

## 4. EMPLOYMENT HISTORY

**4.1 Teaching Experience**Please provide details of your teaching experience beginning with the most recent post.

of School	Contract Type PWT/RPT/Part- time	If pro-rata part-time, timetabled hours per week.	Subjects Taught	Level

**4.2 Non-Teaching Experience (if applicable)**Please provide details of your work history beginning with the most recent post.

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

## **5. SUPPORTING STATEMENT**

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

### 6. REFERENCES

Please provide names, addresses and position/occupation of two people (other than relatives or friends) with knowledge of you and your work to whom professional reference can be made. 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 for interview].

### Present or most recent employer:

	<del>-</del>				
Name & Title:	Position Held:	Telephone/Mobile:	Email:		
Full address:					
Other referee:					
Name & Title:	Position Held:	Telephone/Mobile:	Email:		
Full address:					
8. DECLARATION AND SI	GNATURE				
In the event of you being recomme the terms of current DES circular le		d of Management is ob	liged to comply with		
If you are recommended for this potential the Board of Management when the withdraw an offer of employment if	e offer of employment is being r	made. The Board of Ma	anagement may		
The Board of Management cannot enter into a Contract of Employment without first receiving a vetting disclosure.					
By signing below, you consent to a vetting disclosure, received by the Teaching Council from the Vetting Bureau, being made available to the school in accordance with the requirements of Circular Letter 31/2016.					
You are also required to sign the d accurate. The Selection Committee may wisl	h to check any of the details you	have provided.	·		
Providing incorrect information or of from the selection process or, whe					
I declare that the information suppl			•		
Signed		Date			

Completed Applications should be returned by post on or before 1pm on June 15th 2020 to:

<The Secretary, Board of Management, St. Louis Community School, Kiltimagh, Co. Mayo.</p>

**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 and satisfactory references.

### **Data Protection – Privacy Notice:**

All personal information provided on this Application Form will be processed in a confidential and secure manner as part of the recruitment process. Your data will be retained for a period of 18 months if your application is unsuccessful. If your application is successful, the Board of Management will retain your personal data for the duration of your employment and for 7 years thereafter. Your information will not be disclosed to a third party without your consent save where provided by law or where such processing is necessary to comply with the school's legal obligations. You may at any time make a request for access to your personal data held by the Board of Management about you. Should you wish to make any changes or erasures to your personal data, please contact The Board of Management of the school.