



Cross & Passion College, Kilcullen,
Co. Kildare.

Phone: 045-481524
Email: admin@cpckilcullen.com

Office Use Only:
Date and Time of Receipt:

APPLICANT'S PERSONAL DETAILS			
Position for which you are applying:			
Name (<i>as per Teaching Council Register</i>)			
Correspondence Address:			
Telephone Number:			
E-mail Address:			
Teaching Council No. and Renewal Date:			
Teaching Council Qualified Subjects to Teach:			
EDUCATION RECORD			
Qualification(s)	Awarding University, College or Institute	Final results received:	Day/Month/Year
<p>PLEASE INCLUDE UNDER-GRADUATE & POST-GRADUATE QUALIFICATIONS. INCLUDE ANY QUALIFICATIONS IN SPECIAL EDUCATION, IF APPLICABLE. THE SUCCESSFUL CANDIDATE WILL BE ASKED TO PRESENT ORIGINAL DOCUMENTS.</p>			

DETAILS OF CONTINUOUS PROFESSIONAL DEVELOPMENT
 PLEASE LIST AND CPD / OTHER RELEVANT COURSES YOU HAVE UNDERTAKEN

Qualification & Grade	Awarding University, College or Institute	Length of Course	Final results received: Day/Month/Year

TEACHING EXPERIENCE – MOST RECENT FIRST

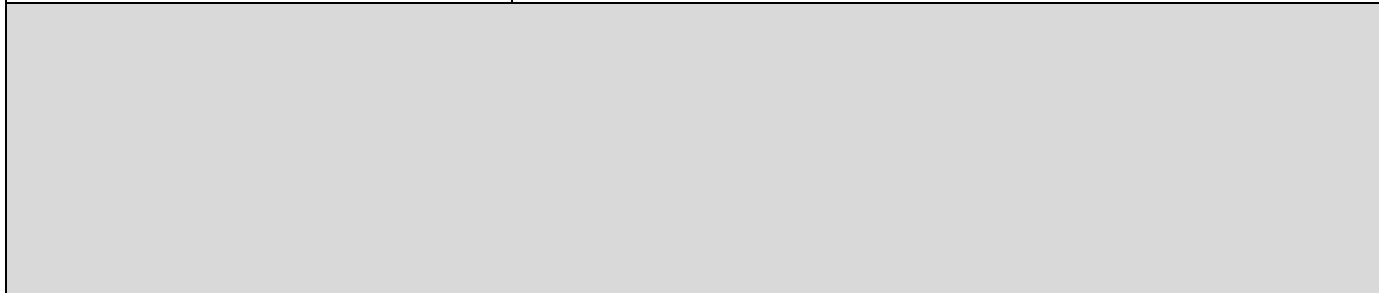
School Name & Address	From:	To:	Timetabled hours per week	Subjects Taught	Level

NON-TEACHING EXPERIENCE

Name and Address of Employer/ Organisation	From:	To:	Position Held	Main duties

AREAS OF SPECIAL INTEREST – CURRICULAR / CO-CURRICULAR / EXTRA CURRICULAR

Area	Interest /Experience
CURRICULAR	
CO-CURRICULAR	
EXTRA-CURRICULAR	



PLEASE INDICATE HOW YOUR EXPERIENCE / CAPABILITY WILL ASSIST IN THIS PARTICULAR POST

NOT MORE THAN 200 WORDS

PLEASE INDICATE HOW YOU THINK YOU CAN CONTRIBUTE TO THE CHARACTERISTIC SPIRIT AND SUCCESS OF CROSS AND PASSION COLLEGE, KILCULLEN

NOT MORE THAN 200 WORDS

My Approach to Teaching:

NOT MORE THAN 200 WORDS

Garda Vetting:

Have you been Garda Vetted: Yes: No:

Evidence of Garda Vetting: _____

In the event of you being recommended for appointment, the Board of Management is obliged to comply with the terms of Cir. 0031/2016 – Commencement of Statutory requirements for Garda Vetting

NAMES & CONTACT DETAILS OF REFEREES*	
1. Professional Referee (1)	
Name	
Relationship:	
Address	
Work Tel No:	
Home Tel No:	
Mobile No:	
2. Professional Referee (2)	
Name	
Relationship:	
Address	
Work Tel No.	
Home Tel No.	
Mobile No.	

***Please Note:**

1. Only those referees who know you in a professional capacity should be included.
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.

All of the details furnished on this application form are true and correct to the best of my knowledge.
I am aware of the qualifications, requirements and particulars for this post, as set out in the advertisement and other relevant documentation.

Signature _____

Date _____