

Mount Saint Michael Secondary School, Rosscarbery, Co. Cork Co. Cork,

023-8848114
Email: info@mtsm.ie



APPLICATION FORM

PLEASE COMPLETE **ALL SECTIONS** OF THIS APPLICATION FORM. IF A SECTION DOES NOT APPLY TO YOU, THEN PLEASE INSERT "N/A" OR "NON-APPLICABLE" ON THAT SECTION OF THE FORM.

SECTION A – PERSONAL DETAILS

Full Name:	
Position Applied For:	
Status of Position: e.g JobShare, RPT etc.	

P.P.S NO _____

Teaching Council Number:								
Subjects registered to teach:								

Garda Vetting Reference Number:								
(UP TO DATE GARDA VETTING DISCLOSURE)								

Address for Correspondence:	

Home Phone Number:	
Mobile Phone Number:	
E-mail address:	

SECTION B – EDUCATION HISTORY

Name of Secondary School:	
Address of Secondary School:	
Leaving Certificate Results:	

SECTION D – QUALIFICATIONS

In the grid below please enter the exact title of each qualification, e.g. Bachelor of Arts, Bachelor of Education Degree, National Diploma in Design, Higher Diploma in Education, Diploma for Art and Design Teachers, Master of Arts, etc.

	Degree Qualification or Equivalent	Teacher Education Qualification	Other (e.g. Masters)
TITLE OF QUALIFICATION			
COLLEGE ATTENDED			
YEAR CONFERRED			
LEVEL OF AWARD (RESULTS - (e.g. 2.1 Honours, Pass)			

If you have further qualifications, please provide details below (or on a separate sheet)

SECTION D – CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

Names of relevant courses done (e.g.ECDL)

SECTION E – EMPLOYMENT RECORD

This section is split into teaching and non-teaching. Please include periods when you were not working under the non-teaching section. Continue on separate sheet if necessary.

TEACHING EXPERIENCE

Please give most recent employment first.

Dates (from – to)	Length of time (months/years)	Name & Address of School/College	Subjects and Levels (HL) or (OL) taught <small>HL=Higher Level OL=Ordinary Level</small>	Year Group (e.g. 1 st yr, 5 th yr)	Status of Position held (full-time/*part-time) <i>*please specify no. of hours per week</i>
					<input type="checkbox"/> Part Time <input type="checkbox"/> FullTime <input type="checkbox"/> Substiute
					<input type="checkbox"/> Part Time <input type="checkbox"/> FullTime <input type="checkbox"/> Substiute
					<input type="checkbox"/> Part Time <input type="checkbox"/> FullTime <input type="checkbox"/> Substiute
					<input type="checkbox"/> Part Time <input type="checkbox"/> FullTime <input type="checkbox"/> Substiute
					<input type="checkbox"/> Part Time <input type="checkbox"/> FullTime <input type="checkbox"/> Substiute
					<input type="checkbox"/> Part Time <input type="checkbox"/> FullTime <input type="checkbox"/> Substiute

NON-TEACHING EXPERIENCE: Please give most recent employment first.

Name of Employer	Address of Employer	Post title	Dates (from – to)	Position held (part-time/ full-time)
				<input type="checkbox"/> Part Time <input type="checkbox"/> FullTime
				<input type="checkbox"/> Part Time <input type="checkbox"/> FullTime

SECTION F – REFERENCES

Please nominate at least two referees – two referees must be your most recent employers.

Name of first referee

Name of second referee

Name of third referee
(optional)

Their job title

Their job title

Their job title

Address

Address

Address

Work phone number

Work phone number

Work phone number

Mobile phone number

Mobile phone number

Mobile phone number

SECTION G – ADDITIONAL RELEVANT INFORMATION

e.g. Hobbies/Interests/Achievements

Thank you.