### APPLICATION FORM FOR TEACHING POST

### **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:
Office use only			

	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)			
Qu	ALIFICATION TO TEACH AT PRIMARY LEVE	L		
Qualification(s)	Awarding University, College or Institute	Final results received: Day/Month/Year		
	TEACHING COUNCIL REGISTRATION			
Registration Number				
Registered under Regulation (please tick as	appropriate):			
Regulation 2 (Primary)				
Regulation 3 (Montessori and Other Categor	ies)			
Regulation 4 (Post-primary)  Regulation 5 (Further Education)				
	_			
Registration Status: Full	Conditiona			
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 $\square$ Restricted $\square$				

DETAILS OF ACADEMIC QUALIFICA	<b>ATIONS</b> – MOST	RECENT FIRST			
INCLUDE UNDER-GRADUATE & POST-G	GRADUATE QUALII	FICATIONS. PLEASE INCLUDE	ANY QUALIFICATIONS IN SPECIA	AL EDUCA	TION, IF APPLICABLE. THE
SUCCESSFUL CANDIDATE WILL BE ASKE	D TO PRESENT OR	IGINAL DOCUMENTS.			
Qualification & Grade	Award	ing University, College or Institute	Length of Course		nal results received: Day/Month/Year
TEACHING EXPERIENCE — MOST R FORMAT). *IF NEWLY QUALIFIED, PLEASE GO TO I		NECESSARY EXPAND THE SECT	ION OR USE ADDITIONAL PAGE	S IF COM	IPLETING IN HANDWRITTEN
School Name & Address		Date(s) of service in the school	Position(s) held	Dates	in each Position
				From:	:
				To:	
				From:	
				From:	
				To:	•
				From:	;
				To:	
				From	:
				To:	
POST(S) OF RESPONSIBILITY HELD	(IF ANY) – Mo	ST RECENT FIRST			
School Name	Add	dress	Position(s) held		Dates
					From:
					То:
					From:
					To:

*IF NEWLY QUALIFIED PLEASE INSERT TEACHING PRACTICE GRADES — MOST RECENT FIRST						
School Name		Address	Class t		Dates	Grade
					From: To:	
					From:	
					То:	
					From:	
					То:	
					From:	
					To:	
ADDITIONAL QUALIFICATIONS E.G. IC	T, CERTIF	FICATE TO TEACH RELIGION (IF	APPLICABL	.E)		
College(s)		Qualification and Year		Module	es Studied	
OTHER RELEVANT, NON-ACCREDITED COURSES — MOST RECENT FIRST						

AREAS OF SPECIAL INTEREST — CURRICULAR/OTHER				
Area	Expertise/Experience/Specia	alism undertaken in Co	llege	
OTHER RELEVANT EMPLOYMENT EXP	LERIENCE — MOST RECENT FIRST			
Employer/Project	Position	Duties	Dates	Grade
			From: To:	
			10.	
			From:	
			То:	
			From:	
			То:	
			From:	
			То:	
_				
PLEASE INDICATE HOW YOU THINK YO			R POST	
	NOT MORE THAN	150 WORDS		

PLEASE INDICATE HOW YOU THINK YOU CAN CONTRIBUTE TO THE ETHOS AND SUCCESS OF THIS SCHOOL				
Ne	OT MORE THAN 150 WORDS			
ADDITIONAL INFORMATION (NOT ALREADY MENTION	ED) TO SUPPORT YOUR APPLICATION			
	ED) TO SUPPORT YOUR APPLICATION OT MORE THAN 150 WORDS			

Names & Contact Details of Referees*				
Referee 1		Referee 2		
Name		Name		
Roll		Roll		
Address		Address		
Work Tel Number		Work Tel Number		
Home Tel Number		Home Tel Number		
Mobile Nr		Mobile Nr		
	Referee 3		Referee 4	
Name		Name		
Roll		Roll		
Address		Address		
Work Tel Number		Work Tel Number		
Home Tel Number		Home Tel Number		
Mobile Nr		Mobile Nr		

# \*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.
- 1. 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.