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| **APPLICATION FORM - TEACHING STAFF** | | | |
| **APPLICATION FOR THE POST OF:** | | | |
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| 1. **Personal details (Please complete in block letters and black ink or typescript)** | | | |
| Surname: Click or tap here to enter text. | Forename(s) : | | Dr / Mr / Mrs / Ms / Miss  (delete as appropriate) |
| Previous Surname (s): | | | |
| Present Address including Post Code:  Click or tap here to enter text. | | Correspondence Address, including post code  (if different) | |
| Previous Address (within the last 5 years) | | Telephone number (Home): | |
| Daytime Contact number:  Click or tap here to enter text. | |
| E-Mail address: | | Mobile Phone number: | |
| National Insurance Number:  Click or tap here to enter text. | | Teacher’s Reference Number: | |
| GTCNI Reference number: | | Are you entitled to work in the UK? Yes / No | |

For Office Use Only

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| **Date Received** | **SL** | |  | | **Ref. Inv.** | | **Ref. Rec** | | **Interview** | **Res.** |
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| 1. **QUALIFICATIONS**   **(include courses successfully completed or currently being undertaken)** | | | | | |
| GCSE AND “A” LEVEL EXAMINATIONS (and equivalent or other qualifications) | | | | | |
| SUBJECT PASSED | | | RESULT / GRADE | | YEAR |
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| **DEGREE AMD HIGHER LEVEL COURSES (including any post graduate qualifications)** | | | | | |
| COLLEGE / UNIVERSITY | COURSE | INDNTIFY CLEARLY MAIN & SUBSIDUARY SUBJECTS | | DATE / EXPECTED DATE IF COMPLETION & RESULT | |
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| ARE YOU PRIMARY / SECONDARY / FURTHER EDUCATION TRAINED?  (please delete as appropriate) | | | | | |
| OTHER QUALIFICATIONS / AWARDS  (include professional qualification(s) / membership, special prizes, achievements and awards or honours) | | | | | |
| QUALIFICATIONS (include membership level) | | | RESULT / GRADE | | YEAR |
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| **IN-SERVICE TRAINING COURSES COMPLETED (appropriate to the position)** | | | | | |
| COURSE DESCRIPTION | YEAR | DURATION | | NO OF HOURS PER DAYS / EVENINGS PER WK | |
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| 1. **EMPLOYMENT - PRESENT TEACHING POST** | | | | |
| SCHOOOL (Name and Address) | | | | |
| ENROLMENT: | | DATE OF APPOINTMENT TO SCHOOL: | | |
| PRESENT POST: | | DATE OF APPOINTMENT TO PRESENT POST: | | |
| PERMANENT / TEMPORARY \* | FULL / PART TIME\* | | | SALARY SPINAL POINT: |
| MANAGEMENT ALLOWANCES (if any): | | | | |
| OTHER ALLOWANCES (eg Special Needs) | | | | |
| \* delete as appropriate | | | | |
| CLASSES TAUGHT (if Primary) or  SUBJECTS TAUGHT (if Secondary or Grammar) | | | INDICATION TO WHAT LEVEL, eg GCSE | |
| DUTIES ATTACHED TO PRESENT POST: | | | | |

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| REASON FOR LEAVING: |

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| **EMPLOYMENT - PREVIOUS TEACHING POST (beginning with the most recent)** | | | | |
| SCHOOL (Name & Address) AND ENROLMENT | POST & DUTIES  (briefly) | DATE | | REASON FOR LEAVING |
| FROM | TO |
|  |  |  |  |  |
| **GAPS IN EDUCATION / EMPLOYMENT HISTORY**: Please account for any time since leaving school / college / university which has not been included in previous information. You should also account for any gaps in between, eg a **1 year gap year between leaving school and starting university.** | | | | |
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| **PLEASE GIVE DETAILS OF ANY RESPONSIBILITY IN YOUR PRESENT OR PREVIOUS POST FOR:**  (1) AREA(S) OF THE CURRICULUM (with dates) |
| (2) ASPECT(S) OF SCHOOL ADMINISTRATION (with duties) |

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| 1. **NON-TEACHING POSTS (Relevant to post and / or subject area)** | | | | | | |
| **PRESENT POST** | | | | | | |
| EMPLOYER (Name and Address) | | | | | | |
| POST HELD: | | DATE APPOINTED: | | | | SALARY: |
| PERMANENT / TEMPORARY \*  \*delete as appropriate | | | FULL / PART TIME\* | | | |
| DUTIES: | | | | | | |
| REASON FOR LEAVING: | | | | | | |
| **PREVIOUS POSTS** (beginning with the most recent) | | | | | | |
| EMPLOYER  (Name and Address) | POST AND DUTIES  (Briefly) | | DATE | | REASON FOR LEAVING | |
| FROM | TO |
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| 1. THE SELECTION PANEL SHORTLIST ON THE BASIS OF THE INFORMATION WHICH YOU PROVIDE ON THIS APPLICATION FORM. THEREFORE, INSUFFICIENT OR INCOMPLETE INFORMATION MAY RESULT IN FAILURE TO BE SHORTLISTED. PLEASE USE THIS SPACE TO DEMONSTRATE HOW YOU MEET THE REQUIREMENS OF THE POST AS DETAILED IN THE ADVERTISED CRITERIA (ESSENTIAL AND DESIRABLE)   **This section MUST NOT be more than 2 pages long.**  **APPLICANTS MUST NOT SUBMIT A CURRICULUM VITAE OR ADDITIONAL PAGES** |
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| 1. **ADDITIONAL RELEVANT INFORMATION (Please state information relevant to the job description, related to both employment or personal interests, why you are suitable for his post and your objectives.** |
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| 1. **CHILD PROTECTION (Please note this post is a “regulated position” as defined under POCVA (NI) Order 2003)** |
| Is there any reason as to why you would not be suitable to work with children / young people in an educational setting? YES / NO  If YES, please provide details: |

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| 1. **REFERENCES** | |
| Please give the names and addresses of two referees, at least one of whom should be able to comment on your suitability to work with children/ young people in an educational setting (if applicable) and your professional ability. Prior consent of referees must be obtained. References must not be submitted with this form. You should note that while it is not essential to nominate your present employer as a referee at this time, in the event of you being offered a post the Board of Governors will seek references from your present/most recent employer. **By signing Section 10 of this form you will be indicating agreement to this reference being sought.** | |
| **Referee 1**  **Name:**  **Position Held:**  **Address:**  **Telephone No:**  **Email address:**  **Capacity in which you know this person:** | **Referee 2**  **Name:**  **Position Held:**  **Address:**  **Telephone No:**  **Email address:**  **Capacity in which you know this person:** |

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| **9. DISABILITY** |
| In accordance with the Disability Discrimination Act 1995, a person is disabled if they have, or have had, “a physical or mental impairment which has, or has had, a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities”.  If you consider yourself to have or have had a disability that is relevant to the position for which you are applying, please provide any relevant information about your disability and any requirements that you may need so that we can process your application fairly and make any reasonable arrangements/adjustments to enable you to attend for interview. |

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| 10. **DECLARATION (CANVASSING, FALSE DECLARATION, CONSENT, DATA PROTECTION / REFERENCES)** |
| **I hereby certify and declare that:**   1. I am aware that I may approach the Headmaster to seek information about the post. 2. I declare that I have not canvassed in any way and that the information contained in this form is true and accurate. 3. I understand this post is (or may be) exempt from the provision of the Rehabilitation of Offenders (Exceptions Amendment) Order (Northern Ireland) 1987. In the event of my application being successful, I consent to a check being made to determine if there is any record of criminal convictions, pending prosecutions, cautions or bind-over orders against me; 4. I understand that the information on this form is required by the Board of Governors for the purpose of processing my application.   The information is covered by the provisions of the Data Protection Act 2018. My signature to the form is deemed to be an authorisation by me to allow the Board of Governors to process and retain the information for the purpose(s) stated including approaching my current/most recent employer for a reference in the event of me being recommended for appointment to the Post.   1. I understand that if I provide false or misleading information in regard to qualifications, experience and/or criminal offence, I may have any offer of employment withdrawn, or if employed may be dismissed from the service. **I hereby certify that the above declaration is in all respects true.**   Signature: ................................................................................................. Date: ............................................... |