Application Form For Teaching Posts

|  |  |
| --- | --- |
| **Applicant’s Name**  |  |
| **Position applied for**  |  |

|  |  |
| --- | --- |
| **Roll Number** | **20351R** |
| **Manager** | **Ms. Patricia O Brien** |
| **School**  | **Naas Community National School** |
| **Address** | **Craddockstown Road, Naas, Co. Kildare** |
| **County** | **Kildare** |

**Please Note:**

1. The application form must be sent to the Chairperson’s address provided in the advertisement
2. Please submit three copies of this application form
3. The completed form must arrive to the Chairperson’s address on or before the date and time as specified in the advertisement
4. This form may be completed electronically or in handwriting using black ink. It must be signed and submitted to the Chairperson in hard copy only.
5. Canvassing will disqualify.
6. **PLEASE INCLUDE WITH THIS APPLICATION:**
	1. A Curriculum Vitae
	2. Any certificates relating to Teaching / other Qualifications with this form.

(The successful candidate will be required to present original documents in relation to Teaching/other Qualifications prior to appointment.)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **For official** **use only** | Received By: | Date:  | Time: | Short listing score: |

|  |
| --- |
| **Personal Details** |
| **Name** |  |
| **Home Address** | **Mobile Telephone No.** |  |
| **Home Telephone No.** |  |
| **Teaching Council Registration Number**  |  |
| **E-mail Address** |  |

|  |  |
| --- | --- |
|  | \*If p please insert teaching practice grades – if available |
|  | School Name | Address | Class taught  | Dates | Grade |
|  |  |  |  | FromTo |  |
|  |  |  |  | FromTo |  |
|  |  |  |  | FromTo |  |

|  |
| --- |
| Teaching Experience - most recent first Probated : Yes □ No □ |
| School Name | Address | Position held  | Dates |
|  |  |  | FromTo |
|  |  |  | FromTo |
|  |  |  | FromTo |

|  |
| --- |
| Post(s) of Responsibility – Most recent first |
| School Name | Address | Position Held  | Dates |
|  |  |  | FromTo |
|  |  |  | FromTo |

|  |
| --- |
| **Education Qualifications –** most recent firstInclude under graduate & post-graduate qualifications. The successful candidate may be asked to present original documents |
| Qualification | **Awarding University, College or Institute** | **Overall Grade** | **Year of Award** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| relevant courses taken/Professional Development– most recent first:  |
|  |

|  |
| --- |
| Other Relevant employment experience - most recent first |
| Employer/Project | Position | Duties | Dates |
|  |  |  | FromTo |
|  |  |  | FromTo |
|  |  |  | FromTo |
|  |  |  |  |

|  |
| --- |
|  **Areas of special interest – curricular /other** |
| Area  | Expertise/Experience |
|  |  |
|  |  |
|  |  |
|  |  |

|  |
| --- |
| **What is your understanding of the Community National School model?**Not more than 150 words  |
|  |

|  |
| --- |
| **Briefly outline your motivation for applying for this position-including examples of voluntary work, community involvement, etc.**Not more than 150 words |
|  |

|  |
| --- |
| **What do you consider are your most significant strengths and qualities you would bring to this position?**Not more than 150 words |
|  |

|  |
| --- |
| **Additional information (not already mentioned) to support your application.** Not more than 150 words |
|  |

**Please Note:**

1. Please include at least two referee who know you in a professional capacity
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 at which referees can be contacted (three if possible) are given.

|  |
| --- |
| **Names & Contact Details of Referees**  |
| **Referee 1 (Professional)** | **Referee 2 (Professional)** |
| Name  |  | Name |  |
| Role |  | Role |  |
| Address  |  | Address |  |
| Work Tel Number: |  | Work Tel Number: |  |
| Home Tel Number:  |  | Home Tel Number: |  |
| Mobile Tel Number: |  | Mobile Tel Number: |  |
|

|  |  |
| --- | --- |
| **Referee 3 (Professional)** |  |
| Name |  |
| Role |  |
| Address |  |
| Work Tel Number: |  |
| Home Tel Number:  |  |
| Mobile Tel Number: |  |
|

|  |
| --- |
| **Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Date ­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
|  |

 |

 |