SCOIL MHUIRE

Scoil Mhuire Kanturk APPLICATION FOR A TEACHING POSITION 2024-25



Subject(s) please insert	

Please note:

This form must be signed.

All questions must be answered.

Do not change the question numbers or sequence.

No letter of application, CV or written reference should accompany this form.

Office use only
Date received:
Time received:

1. PERSONAL DETAILS

First Name:		Surname:		
Home Address:		Correspondence Addre	ess: (if differe	ent)
Home Phone Num	ber:	Mobile Phone Number:		
Email Address:				
•	ctions regarding your employ please provide details on se		Yes	No
Do you require a Work Permit?			Yes	No
Are you registered with the Teaching Council?			Yes	No
If YES, Teaching C	ouncil Registration Number:			
If NO, are you eligib	ole for registration and willing	to register?		
Please note that the successful candidate will be paid by DoE and will have to fulfill DoE conditions which include registration with the Teaching Council prior to commencement of employment.				

2. PRESENT POSITION

Please give details of your current position:

Employer:	Address:		Job Title:	
How much notice do you need to	o give			
your current employer?				
3. QUALIFICATIONS				
3.1 Second Level Education				
Leaving Certificate/Equivalent				Year ———
School attended:				
Subject		Gra	de	Hons/Ord
3.2 Primary Degrees/Diplomas:				
University/Institute/College:				
Qualification (Hons/Pass):		Awarding Body:		
Year of Entry: Year Quali		Year Qualified:	r Qualified:	
Subjects studied:				
First Year Subjects	s		Final Year Subje	cts

3.3 PGDE / HDIP / Equivaler	<u>nt)</u> :			
University/Institute/College:				
Qualification:		Awarding Boo	dy:	
Year of Entry:		Year Qualifie	d:	
Subjects studied:				
3.4 Post Graduate Qualifica	<u>tion</u>			
University/Institute/College:				
Qualification:		Awarding Body		
3.5 In-Service Courses/Train List any in-service courses/train these courses. Start with the most	ing you have received. Pl		ates of the relevant training a	and duration of
Name of Course	Name of Organisation running cou	n/Institution	Length of Course	Year

4. EMPLOYMENT HISTORY

4.1 Teaching ExperiencePlease provide details of your teaching experience beginning with the most recent post.

Name & Address of School	Contract Type PWT/RPT/Part- time	If pro-rata part-time, timetabled hours per week.	Subjects Taught	Level
	Name & Address of School	Name & Address of School Contract Type PWT/RPT/Part-time	Name & Address of School Contract Type PWT/RPT/Part-time If pro-rata part-time, timetabled hours per week.	Name & Address of School Contract Type PWT/RPT/Partime Immediate Name & Address of School If pro-rata part-time, timetabled hours per week. Subjects Taught If pro-rata part-time, timetabled hours per week. Subjects Taught If pro-rata part-time, timetabled hours per week. Subjects Taught If pro-rata part-time, timetabled hours per week. Subjects Taught If pro-rata part-time, timetabled hours per week. Subjects Taught If pro-rata part-time, timetabled hours per week. Subjects Taught If pro-rata part-time, timetabled hours per week. Subjects Taught If pro-rata part-time, timetabled hours per week. If pro-rata part-time, timetabled hours per week. Subjects Taught If pro-rata part-time, timetabled hours per week. If pro-rata part-timetabled hours per w

4.2 Non-Teaching Experience (if applicable)Please provide details of your work history beginning with the most recent post.

Dates (From/To)	Name & Address of Employer	Position held	Summary of Main Duties

5. SUPPORTING STATEMENT

This section is for you to provide a summary of your teaching experience, your approach to teaching and any extra-curricular activities you have organised and are willing to promote.		

6. REFERENCES

Please provide names, addresses and position/occupation of two people (other than relatives or friends) with knowledge of you and your work to whom professional reference can be made. One should be your current or most recent employer. [Please note: your referees may be contacted without further communication with you and prior to selection interview if shortlisted for interview].

Present or most recent employer:

Name & Title:	Position Held:	Telephone/Mobile:	Email:
Full address:			
Other referee:			
Name & Title:	Position Held:	Telephone/Mobile:	Email:
Full address:			
8. DECLARATION AND SI	GNATURE		
In the event of you being recomme the terms of current DoE circular le		d of Management is ob	liged to comply with
If you are recommended for this po the Board of Management when th withdraw an offer of employment if	e offer of employment is being r	made. The Board of Ma	anagement may
The Board of Management cannot disclosure.	enter into a Contract of Employ	ment without first rece	ving a vetting
By signing below, you consent to a Bureau, being made available to the	•	•	•
You are also required to sign the daccurate.	eclaration below certifying that a	all information you have	e provided is
The Selection Committee may wish Providing incorrect information or of from the selection process or, whe	deliberately concealing any relev	ant facts may result in	
I declare that the information supp	lied in this application form is ac	curate and true.	
Signed		Date	

Completed Applications should be returned on or before **Wednesday May 22nd 2024 no later than 13:00**

by email to: applications@scoilmhuirekanturk.ie

PLEASE NOTE: If you are awaiting confirmation of registration with the Teaching Council, please insert 'Pending' in the Teacher Registration Number section of this Application Form. Any offer of employment will be conditional on registration with the Teaching Council and subject to the satisfactory outcome of the Garda Vetting Process and satisfactory references.