APPLICATION FORM FOR TEACHING POST

2026/27

NAME OF APPLICANT _____

POSITION ADVERTISED _____

ADVERT ID _____

This Form must be returned by email

You should mark 'application' and your subjects in subject of the email.
(Email submissions can be sent to recruitment@stcolmanscollege.com
with the subject line reading "**application")**

- **This form must be signed (last page can be signed and scanned if emailed).**
- **All questions must be answered.**
- **Do not change the question numbers or sequences.**
- **No CV should accompany this form.**

In line with our Data Protection Retention Schedule Policy your application will be kept on file for 18 months from close of competition and then shredded.

APPLICATION FORM FOR TEACHING POSTS 2026/27

POSITION ADVERTISED

PERSONAL DETAILS

Name					
Home Address					
Email					
Mobile Phone Number					
Are you registered with the Teaching Council of Ireland?	**Yes** ☐ **No** ☐	**Teaching Council Registration No:**			
		Registration Renewal Date:			
		Subjects Registered to Teach:			
Sector Registered For:	**Further Education** ☐	**Post Primary** ☐	**Registration Level:**	**Full** ☐	**Conditional** ☐

Note: *A candidate proposed for appointment to a teaching position will be required to be* ***currently*** *registered with the Teaching Council in accordance with Section 31 of the Teaching Council Act, 2001.* ***For new graduates*** *– Registration with the Teaching Council of Ireland and Garda Vetting will follow pending results of final exams.* **A photocopy of your Teaching Council Registration Certificate which states the subjects you are registered to teach should be added to the end of the application form and submitted with this application.**

1. EDUCATION

Post Primary Education			
School:		YEAR OF LC.	
LEAVING CERTIFICATE SUBJECTS AND GRADE ACHIEVED:			

PRIMARY DEGREE		HONOURS *(specify level e.g. 1.1; 2.1)*		YEAR OF AWARD	
UNIVERSITY/ COLLEGE:		PASS		LENGTH OF COURSE	
FINAL YEAR SUBJECTS:					

TEACHER TRAINING Please circle relevant qualification	H DIP	PME	PDGE	HONOURS *(specify level e.g. 1.1; 2.1)*		YEAR OF AWARD	
UNIVERSITY/ COLLEGE:				PASS		LENGTH OF COURSE	
Teaching Practice Grade (mandatory):							

MASTERS DEGREE (other than PME)		HONOURS *(specify level e.g. 1.1; 2.1)*		YEAR OF AWARD	

UNIVERSITY/COLLEGE:		PASS		LENGTH OF COURSE	

POST HONOURS DOCTORATE		HONOURS *(specify level e.g. 1.1; 2.1)*		YEAR OF AWARD	
UNIVERSITY/COLLEGE:		PASS		LENGTH OF COURSE	

OTHER ADDITIONAL DIPLOMAS OR CERTIFICATES:

Up to a maximum of three. Any diploma/certificate listed must have been studied for a minimum of 30 hours or 12 weeks.

QUALIFICATION: **HONOURS or PASS** *(specify level e.g. 1.1; 2.1)*		**AWARDING COLLEGE**		**YEAR OF AWARD**	
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QUALIFICATION: **HONOURS or PASS** *(specify level e.g. 1.1; 2.1)*		**AWARDING COLLEGE**		**YEAR OF AWARD**	

INSERVICE/CPD

Please list in order beginning with most recent in-service/CPD undertaken in the last 3 years, including dates and duration:

2. TEACHING EXPERIENCE:

SCHOOL/CENTRE (*Most Recent Employment First*) **Name**	**FROM** *(MM/YY)*	**TO** *(MM/YY)*	**CONTRACT TYPE**				
			Permanent	**Fixed Term**	**Maternity Leave**	**Teaching Practice**	**OTHER**

SUBJECTS AND LEVELS TAUGHT:

Subject Details Please specify subjects taught during the last 3 years only. Please complete all sections for each subject.	*LC H*	*LC O*	*JC H*	*JC O*	*TY*	*SEN*
Subject A:						
Subject B:						
Subject C:						

ICT AND SUBJECT CURRICULUM

Please give a brief account of your usage of ICT in your classroom practice.

For NQTs please outline your planned usage of in teaching subject curriculum.

3. SCHOOL INVOLVEMENT/POST OF RESPONSIBILITY

Please give a brief account of any curriculum initiative or any other initiative that you have been involved in over the last 3 years.

For NQTs please give a brief outline of initiatives you might like to be involved with in school.

4. EXTRA CURRICULAR ACTIVITIES

Please give examples of extra-curricular activities you have been involved in within your school. Please include dates.

For NQTs please give examples of activities that you would like to promote.

Please give a brief account:

5. COMMUNITY INVOLVEMENT/VOLUNTEERISM/INTERESTS OUTSIDE OF SCHOOL

Dates		Name of Organisation	Status (If relevant)	Brief Description of Duties or Involvement
From (mm/yy)	To (mm/yy)			

6. OTHER RELEVANT WORK EXPERIENCE

Dates		Name of Organisation	Status (If relevant)	Brief Description of Duties or Involvement
From (mm/yy)	To (mm/yy)			

7. PERSONAL STATEMENT (maximum 200 words)

8. **REFEREES - to include your <u>most recent</u> employer/academic supervisor (not a relative). Please inform referees that you have nominated them.**

	REFEREE NO. 1	REFEREE NO. 2
Name:		
Position:		
School/Business Address:		
<u>Mobile No.:</u>		

<u>IF YOU HAVE ANY WRITTEN REFERENCES, PLEASE ATTACH THEM ALSO.</u>

9. PERSONAL DISCLOSURE

St Colman's College has a duty to satisfy itself that no employee poses a threat to students or staff. The school must, therefore, ask the following questions at recruitment stage:

Have you ever been convicted of a criminal offence and/or an offence related to Child Welfare?

YES ☐ **NO** ☐

Have you ever been the subject of an inquiry of investigation by the HSE/TUSLA/An Gardaí concerning a child welfare matter, or an investigation arising from a complaint/allegation of child abuse or wrongdoing towards a minor?

YES ☐ **NO** ☐

If you answer YES to either question above, please detail below the nature and date(s) of the investigation/offence(s):
(This box will enlarge as necessary)

10. GARDA VETTING

It is a requirement of St Colman's College that all existing and new appointees are subject to Garda vetting procedures.

☐ ☐ ☐

Have you been Garda Vetted by the Teaching Council of Ireland **YES** **NO** **DATE:**

If successful, you will be required to complete the JMB Garda Vetting Process.

DECLARATION
I declare that the information given in this application is true and are correct. I understand and accept that St Colman's College reserves the right to verify any element(s) of particulars furnished in this application form and that the furnishing by me of any incorrect or inaccurate particulars will render me liable to disqualification from the application process/appointment.
Signed: ***(if digital signature not available please type name)***
Date:

CHECKLIST BEFORE SUBMITTING APPLICATION

Have you signed the application form?	
Have you noted the closing date for application?	
Have you the correct address?	
Have you included your Teaching Council number?	
Have you included a photocopy of your Teaching Council registration documents?	
Have you checked that there are no blank sections on your application?	
Have you carried out a spelling and grammar check?	

No CV should accompany this form.