

APPLICATION PROCEDURE

Before completing this application form please read the following carefully:

The Application Form must be TYPED. Handwritten forms will not be accepted.

All questions must be answered.

Do not change the question numbers or sequence.

Boxes may be expanded as required – please comply with maximum word count requirements.

Your application will be assessed on the information you submit on the official application form. Please ensure all sections are completed fully and accurately, giving clear evidence of qualifications, skills and experience.

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

Further information on Clifden Community School can be found on our website www.clifdencommunityschool.com

Canvassing will disqualify. Clifden Community School is an equal opportunities employer. Completed application form must be submitted by email to: recruitment@clifdencs.ie



TEACHER APPLICATION FORM (2019-2020)

Position Applied for:		

1. PERSONAL DETAILS:

Name				
Home Address				
Email - this is the primary method of communication				
Landline Phone Number			Mobile Phone Number	
Current Position & Employment Status				
Are you registered with the Teaching Council: (Please tick a box)	Yes	No	Teaching Council Registration No:	
Have you scanned and attached to this application your Teaching Council registration detailing the subjects you are recognised to teach?	Yes	No		
Have you current Garda Vetting from the National Vetting Bureau? (Please tick a box) If "yes" please provide a scanned copy and attach to this application	Yes	No	Subjects registered to teach:	1. 2. 3.

Note: Candidates <u>proposed for appointment</u> to teaching positions are required to be <u>currently registered with</u> <u>the Teaching Council</u> in accordance with Section 31 of the Teaching Council Act, 2001. Candidates should share, via Digitary, Vetting Disclosure, by e-mailing <u>principal@clifdencs.ie</u>



2. QUALIFICATIONS:

PLEASE OUTLINE DETAILS IN CHRONOLOGICAL ORDER OF ALL FURTHER EDUCATION AND THIRD LEVEL ACADEMIC AWARDS

NAME AND ADDRESS OF PERIOD OF STUDY AWARD/QUALIFICATION CLASS OF YEAR OF FINAL YEAR SUBJECTS

ACADEMIC INSTITUTION/AWARDING BODY		OBTAINED (HONOURS DEGREE, ORDINARY DEGREE, CERTIFICATE ETC) AWARD (IE 1st, 2.1, 2:2, Pass)		AWARD DEGREE SUBJECTS/		TAKEN IN YEAR 2, 3 AND 4 OF DEGREE COURSE		
	FROM:	То:	OLK IIII CATE ETC	5)				COURSE
_								
OTHER QUALIFICATIONS (IF APP	PLICABLE)							
NAME OF INSTITUTION ATTEND	DED	FROM:	То:	YEAR	OF AWARD	CLASS	F AWARD/GRAD	E OBTAINED
Leaving Certificate Re	sulte		School			Vaari		
	Juits					_ icai.		
Subject			Grade			Higher/Ordinary		
								



3. TEACHING EXPERIENCE:

Please begin with present or most recent employment:

<u>SCHOOL</u>	Dates		STATUS:	SUBJECTS TAUGHT/ LEVEL:	TIMETABLED
(Please begin with present or most recent employment)	From	to	TP / PT / FT/ PRPT / TWT /PWT / CID	LC – H/O JC – H/O	Hours Per Week
Name & Address	(d / m / y)	(d / m / y)	/Substitution	TY/LCA/JSCP SEN/TEAM TEACHING	

Note: T/P = Teaching practice P/T - Part-time F/T = Fixed Term PRPT = Pro-rata Part-time

TWT = Temporary Wholetime CID = Contract of Indefinite Duration PWT = Permanent Whole-time

4. OTHER RELEVANT EXPERIENCE:

Da	tes		Status	Brief Description of Duties		
From (d/m/y)	To (d/m/y)	Name of Organisation	(Permanent/ Temporary)			

5. USE OF ICT IN TEACHING AND LEARNING:

Please outline your experience of using ICT in teaching and learning to date.

For NOTs please outline your planned use of ICT in teaching and learning in the classroom.

The second secon					
Please use bullet points					



6. EXTRA CURRICULAR ACTIVITIES WITHIN SCHOOL:

Please give details of activities that you have lead – to include dates:

For NQTs please indicate the extra-curricular activities that you would like to be involved in.

Please use bullet points
T. H. C. LIVOH C. C. LIL C. L. C. L. L. L. C. LEDEN COMMUNITY COHOL.
7. How would YOU support the characteristic spirit of CLIFDEN COMMUNITY SCHOOL
(150 words maximum):
O ADDITIONAL INFORMATION F. H. '.C' II
8. ADDITIONAL INFORMAITON: Further information — is there any other information/skill
that you feel is relevant to your application?

9. REFEREES:

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]. Please ensure to provide a mobile number for each referee. All appointments are subject to references satisfactory to Clifden Community School BOM.

NAME:	NAME:
POSITION	POSITION
ADDRESS	ADDRESS
TEL. NO. (MOBILE)	TEL. NO. (MOBILE)
TEL. NO. (WORK)	TEL. NO. (WORK)
E-MAIL ADDRESS	E-MAIL ADDRESS



DECLARATION:

If this section is not completed, your application will not be considered for processing.

Have you been investigated by the Gardaí, HSE, or your employer in relation to substantiated complaints made concerning your treatment of children?					
YES		NO			
Were you the subject of a	any allegation of criminal conduct or	wrongdo	oing towards any individual(s)?		
YES		NO			
Are you aware of any ma	aterial circumstance in respect of you	ır own co	anduct which touched/touches on the welfare of a minor?		
YES		NO			
Are you aware of any ma	aterial circumstance in respect of you	ır own co	anduct which touched/touches on the welfare of an adult?		
YES		NO			
If you tick Yes to an	y of the above, please provide	details	:		
outlined above. You sho	• • •	satisfied,	ou make appropriate full disclosure in respect of the questions in the future, that you have made an incomplete or inaccurate ssal.		
The school undertakes that all responses furnished by you in respect of the above questions will be treated as confidential, subject to any reporting obligations which may be imposed on the school, pursuant to "Children First" published by the Department of Children and Youth Affairs, the Child Protection Procedures for Primary and Post-Primary Schools published by the Department of Education and Skills or pursuant to any legal obligation imposed on the school to facilitate the effective investigation of crime.					
In the event of your being	ng recommended for appointment t	to this po	osition Clifden CS BOM is obliged to comply with the terms of		
current DES Circular Letters. Clifden CS BOM requires that all newly appointed teachers and support staff will be vetted via An Garda Siochana and that the outcome of the vetting will be considered in the light of the school's vetting policy. This applies in respect of appointments to teaching posts, principal and deputy principal positions where the person is not currently an employee of the school and applies irrespective of whether the individual has been previously vetted or not.					
DECLARATION AND SIGNATURE:					
 You are required to sign the declaration below certifying that all information you have provided is accurate. The Selection Committee may wish to check any of the details you have provided. Providing incorrect information or deliberately concealing any relevant facts may result in disqualification from the selection process or, where discovery is made after an appointment, in summary dismissal. 					
I declare that the information supplied in this application form is accurate and true.					
Signed			Date		