Mount Saint Michael Secondary School, Rosscarbery, Co. Cork.

POSSCARBER NOUNT SAINT MICHAEL

023-8848114 Email: info@mtsm.ie

APPLICATION FORM

PLEASE COMPLETE ALL SECTIONS OF THIS APPLICATION FORM.

IF A SECTION DOES NOT APPLY TO YOU, THEN PLEASE INSERT "N/A" OR "NON-APPLICABLE" ON THAT SECTION OF THE FORM.

SECTION A – PERSONAL DETAILS

Full Name:						
Position Applied For:						
Status of Position:	FIXED TER	RM				
P.P.S NO		_				
Teaching Council Numbe	r:					
Subjects registered to tea			•	1		
		Г			 	
Garda Vetting Reference						
(UP TO DATE GARDA VETTING BUR	EAU)					
Address for Corresponde	nce:					
Home Phone Number:						
Mobile Phone Number:						
E-mail address:						

ame of Secondary S			DUCATION HISTOR	-
	School:			
dress of Secondary	y School:			
ving Certificate Re	esults:			
	SECT	TON C-	QUALIFICATIONS	
grid below please ent	er the exact title	of each qual	lification, e.g. Bachelor of A	arts, Bachelor of Educa
-		-	, Diploma for Art and Desig	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	gc. z.p.ea.		,	, cuec. ,ustc. c
	Degree Qual	ification	Teacher Education	Other
	or Equiva	alent	Qualification	(e.g. Masters)
ITLE OF				
UALIFICATION				
OLLEGE				
TTENDED				
EAR CONFERRED				
EVEL OF AWARD				
EVEL OF AWARD RESULTS -				
e.g. 2.1 Honours, Pass)				
you have further				
ualifications, please				
ovide details:				

SECTION E – EMPLOYMENT RECORD

This section is split into teaching and non-teaching. Please include periods when you were not working under the non-teaching section. Continue on separate sheet if necessary.

TEACHING EXPERIENCE

Please give most recent employment first.

Dates	Length of time	Name &	Subjects and Levels	Year Group	Status of
(from – to)	(months/years)	Address of School/College	(HL) or (OL) taught HL=Higher Level OL=Ordinary Level	(e.g. 1 st yr, 5 th yr)	Position held (full-time/*part- time) *please specify no. of hours per week
					☐ Part Time ☐ FullTime ☐ Substiute
					☐ Part Time ☐ FullTime ☐ Substiute
					☐ Part Time ☐ FullTime ☐ Substiute
					□ Part Time □ FullTime □ Substiute
					□ Part Time □ FullTime □ Substiute
					□ Part Time □ FullTime □ Substiute

NON-TEACHING EXPERIENCE: Please give most recent employment first.

Name of Employer	Address of Employer	Post title	Dates (from – to)	Position held (part-time/ full-time)		
			(HOIII to)	☐ Part Time		
				☐ Part Time		
Please n	SEC nominate at least two re	CTION F — REFE ferees – two referees		t recent employers.		
Name of first refe	ree N	ame of second re	feree	Name of third referee (optional)		
Their job title	Th	eir job title		Their job title		
Address	Ad	dress		Address		
Work phone number	W	ork phone number		Work phone number		
Mobile phone number		obile phone number		Mobile phone number		
•	SECTION G – ADI	DITIONAL RELE	_	MATION		
	c.g. m	A Control of the Cont	<u>emerements</u>			
I hereby ag	ree to comply with	Vetting require		vant Child Protection		
Signed:			Date:			