


All information provided in this form is confidential to the Interview Selection Board. It will be held safe until the appointment process has been concluded, after which it will be destroyed.

	<b>MONAGHAN COLLEGIATE SCHOOL</b> <b>APPLICATION FORM FOR TEACHING POSTS</b>		Please insert a passport size photograph			
<b>Job Information</b>						
<b>Position applied for</b>	<b>Wood Technology, Engineering, Religious Education</b>					
<b>Hours</b>	<b>22 hours</b>					
<b>Additional Information</b>						
<b>Closing date of application.</b>	<b>30<sup>th</sup> May 2022 at 12.00 noon</b>					
<b>Personal Details</b>						
<b>Name</b>						
<b>Home Address</b>		<b>Mobile phone number</b>				
		<b>Home phone number</b>				
		<b>PPS No</b>				
		<b>Teacher Council Number</b>				
<b>School Details</b>						
<b>Roll Number</b>	<b>64830E</b>					
<b>Chairperson</b>	<b>Rev Stephen McNie</b>					
<b>School</b>	<b>Monaghan Collegiate School</b>					
<b>Address</b>	<b>Corlatt, Monaghan</b>					
<b>County</b>	<b>Monaghan</b>					
<b>Eircode</b>	<b>H18 X027</b>					
<b>Patronage</b>	<b>Joint Church of Ireland &amp; Presbyterian</b>					
<b>For Official use</b>	<b>Received by</b>		<b>Date</b>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<b>Time</b>	

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<b>EDUCATION QUALIFICATIONS – MOST RECENT FIRST</b>					
INCLUDE UNDER GRADUATE & POST-GRADUATE QUALIFICATIONS. THE SUCCESSFUL CANDIDATE MAY BE ASKED TO PRESENT ORIGINAL DOCUMENTS					
<b>Degree etc</b>	<b>Grade</b>	<b>Subjects</b>	<b>Awarding Body</b>	<b>Length of course</b>	<b>Year of Award</b>
<b>Teaching Qualification</b>					
<b>Qualification</b>	<b>Grade</b>	<b>Subjects</b>	<b>Awarding Body</b>	<b>Length of course</b>	<b>Year of Award</b>

<b>OTHER RELEVANT, NON-ACCREDITED COURSES – MOST RECENT FIRST:</b>

<b>OTHER RELEVANT EMPLOYMENT EXPERIENCE - MOST RECENT FIRST</b>			
<b>Employer/Project</b>	<b>Position</b>	<b>Duties</b>	<b>Dates</b>
			From To
			From To

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<b>TEACHING EXPERIENCE - MOST RECENT FIRST *IF NEWLY QUALIFIED SEE BELOW</b>			
<b>PROBATED : YES <input type="checkbox"/> NO <input type="checkbox"/></b>			
<b>School Name</b>	<b>Address</b>	<b>Subjects taught</b>	<b>Dates</b>
			From To
			From To

<b>*IF NEWLY QUALIFIED PLEASE INSERT TEACHING PRACTICE GRADES – MOST RECENT FIRST</b>				
<b>School Name</b>	<b>Address</b>	<b>Subjects taught</b>	<b>Dates</b>	<b>Grade</b>
			From To	
			From To	

<b>POST(S) OF RESPONSIBILITY (IF APPLICABLE)– MOST RECENT FIRST</b>			
<b>School Name</b>	<b>Address</b>	<b>Position Held</b>	<b>Dates</b>
			From To
			From To

<b>AREAS OF SPECIAL INTEREST – CURRICULAR /OTHER</b>	
<b>Area</b>	<b>Expertise/Experience</b>

**PLEASE INDICATE HOW YOU CAN CONTRIBUTE TO THE ETHOS OF THIS SCHOOL**

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 one referee who knows you in a professional capacity
2. Please include at least one referee who knows you in a personal capacity
3. Close relatives and friends should not be listed as referees
4. 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.

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**Please Note:**

1. The application form must be sent to the School address provided in the advertisement.
2. Please submit **three copies** of this application form.
3. The completed form must arrive to the School address on or before the date and time as specified above.
4. This form may be completed electronically or in handwriting using black ink. **It must be signed and submitted in hard copy only.**
5. Canvassing will disqualify.
6. **DO NOT**
  - a. Enclose a separate letter of application.
  - b. Send a Curriculum Vitae with this form.
  - c. Enclose any certificates with this form. The successful candidate will be required to present original documents in relation to Teaching/other Qualifications prior to appointment.

NAMES & CONTACT DETAILS OF REFEREES			
Referee 1 (professional)		Referee 2 (personal)	
Name		Name	
Role		Role	
Address		Address	
Work Tel Number:		Work Tel Number:	
Home Tel Number:		Home Tel Number:	
Mobile Tel Number:		Mobile Tel Number:	
UNDERTAKING			
I certify to the Board of Management that the information provided herewith is true and correct.			
Signature		Date	____/____/____