***For Office Use Only***

**Ref. No:**

**Closing Date: 17th May 2024 at 12 noon**

**Date received by School:**

**DOMINICAN COLLEGE**

[**www.dominicancollege.org.uk**](http://www.dominicancollege.org.uk)

**38 Fortwilliam Park**

**Belfast BT15 4AQ**

**02890 370298**

[info@dominican.belfast.ni.sch.uk](mailto:info@dominican.belfast.ni.sch.uk)

|  |  |
| --- | --- |
| **APPLICATION FOR POST OF:** | **Teacher of Music to A-level with the ability to teach an additional subject to KS3/GCSE.** (This is a full-time permanent post) |

* Please complete in full in black ink or typescript (minimum font size 10). All questions must be answered. No additional information pages or CV will be accepted.
* The overall content and format of this form must not be changed. Minor changes to size of text boxes on pages 1, 2 & 5 may be necessary, but the total number of pages must not be increased. Text boxes on pages 3 & 4 are fixed.

|  |  |  |  |
| --- | --- | --- | --- |
| **PERSONAL DETAILS** | | | |
| Title: |  | | |
| Full Name: |  | | |
| Email address: |  | | |
| Address: |  | | |
| Postcode: |  | GTCNI No: |  |
| National Insurance No: |  | TR No: |  |
| Telephone No: |  | | |

**EDUCATIONAL ACHIEVEMENTS**

|  |  |  |
| --- | --- | --- |
| **A-LEVEL OR EQUIVALENT** | | |
| Date | Subject | Grade obtained |
|  |  |  |

**THIRD LEVEL EDUCATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Dates | | Name of university/college | Type of degree, diploma or certificate & main subjects studied | Results achieved (class & division) |
| From: | To: |  |  |  |
|  |  |  |  |  |

**ADDITIONAL QUALIFICATIONS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Dates | | Name of university/college | Type of degree, diploma or certificate & main subjects studied | Results achieved (class & division) |
| From: | To: |  |  |  |
|  |  |  |  |  |

**CONTINUING PROFESSIONAL DEVELOPMENT**

Please provide details of relevant continuing professional development.

|  |  |  |
| --- | --- | --- |
| Dates | | Training or Activity |
| From: | To: |
|  |  |  |

**EMPLOYMENT HISTORY**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Dates | | Employer | Position | Salary Points if applicable |
| From: | To: |
|  |  |  |  |  |

|  |
| --- |
| **Please provide details and reasons for any gaps in employment** |
|  |

*In the following text boxes, the available space is fixed. Minimum font size is 10.*

|  |
| --- |
| **QUALIFICATIONS AND TRAINING** |
| Please demonstrate, using examples, how you meet the criteria as outlined in the Qualifications and Training section of the Personnel Specification. |
|  |

|  |
| --- |
| **EXPERIENCE & KNOWLEDGE** |
| Please demonstrate, using examples, how you meet the criteria as outlined in the Experience and Knowledge section of the Personnel Specification. |
|  |
| **SKILLS** |
| Please demonstrate, using examples, how you meet the criteria as outlined in the Skills section of the Personnel Specification. |
|  |

|  |
| --- |
| **PERSONAL QUALITIES** |
| Please demonstrate, using examples, how you meet the criteria as outlined in the Personal Qualities section of the Personnel Specification. |
|  |

**REFERENCES**

|  |  |  |  |
| --- | --- | --- | --- |
| Please give names, addresses, emails and telephone numbers of two persons willing to provide references, at least one of whom should have knowledge of your present work. (Prior consent is required.) Referees must not be related to you or know you solely as a friend. Dominican College reserves the right to contact any of your previous employers for a reference. | | | |
| **Name:** |  | **Name:** |  |
| **Address:** |  | **Address:** |  |
| **Email:** |  | **Email:** |  |
| **Tel No:** |  | **Tel No:** |  |
| **REFERENCES MUST NOT BE SUBMITTED** | | | |

**MEDICAL HISTORY/SICKNESS RECORD**

|  |  |
| --- | --- |
| Please give dates and details of any serious illnesses, operations or disabilities, or of any recurrent illness of a minor nature. If necessary, give information on a separate sheet. | |
|  | |
| How many days you have been absent from work through illness in the last year? |  |

**CRIMINAL CONVICTIONS**

|  |  |  |
| --- | --- | --- |
| Have you been convicted of any criminal offence? | | Yes/No |
| If yes, Please give details (include nature of offence and sentence). | | |
|  | | |
| NOTE: This post is (or may be) exempt from the provisions of the Rehabilitation of Offenders (Exceptions) Order 1979. You are therefore not entitled to withhold information about convictions, under the provisions of the Order. Any failure to disclose such convictions could lead to disqualification or dismissal. Any information given will be used only in connection with posts to which the Order applies. | | |
| If offered a position with Dominican College please indicate, by signing, your consent to having clearance sought from the PSNI in accordance with DENI Circular 2006/06. | | |
| **Signature:** |  | |

**DECLARATION**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. The foregoing particulars are complete and correct to the best of my knowledge and belief. 2. I do not suffer from any illness or disability which would prevent me from carrying out the duties of this post. 3. I accept and am prepared to work within the ethos of Dominican College. | | | |
| **Signature:** |  | **Date:** |  |
| A candidate found to have knowingly given false information, or to have suppressed any material fact will be liable to disqualification, or if appointed, to dismissal. | | | |
| **CANVASSING WILL DISQUALIFY**  **WE ARE AN EQUAL OPPORTUNITY EMPLOYER** | | | |

Please return this form no later than **12 noon** **on 17th May 2024** by post, addressed to: The Principal, Dominican College, 38 Fortwilliam Park, Belfast, BT15 4AQ. Alternatively it may be sent by email to: [info@dominican.belfast.ni.sch.uk](mailto:info@dominican.belfast.ni.sch.uk) marked for the attention of: The Principal.