

TO BE COMPLETED FOR APPLICATION FOR APPOINTMENT AS A TEACHER

EDUCATION

Seconadary School/College/University, etc. (Include any part-time education)

Full Name of School	Address	Name of Head	Dates	
			From	To

QUALIFICATIONS

(a) Academic School Examinations

Full Name of School	Examinations Passed	Date	Class	Subjects & Standard

(b) Degree Examinations

Full Name or Title of Degree			

(c) Professional Examinations

Full Name of Examinations Passed			

(d) Special Qualifications (e.g. Science, Music, Arts, Athletics)

(e) Refresher Courses			
Full Name of Title of Course	Date	Length	Organizing Body

EXPERIENCE AS A TEACHER

Unqualified Service (i.e. before a Course of Training)

Name and Type of School	Post	Age-Group Taught	Dates	
			From	To

Total number of years of unqualified service \_\_\_\_\_

(b) Qualified Service (i.e., after a Course of Training)

Name and Type of School				

Total number of years of qualified service \_\_\_\_\_

(c) Description of present post

Name and Address of employing authority

(d) State age-group trained to teach

State age-group you would prefer to teach

NON-TEACHING EXPERIENCE (Industrial, clerical, professional, social)

NOTE: The application must be accompanied by (a) Original or reprographic copies of qualifications claimed, and (b) Medical Certifiacte of fitness. Please lis the documents you are enclosing.

Name of Document	FOR OFFICE USE ONLY