

TEACHER APPLICATION FORM

Please complete this form and return with a current photo by email

1. PERSONAL DETAILS

Name		Surname	
Home Address		Contact Address	
E-mail		Marital Status	
Nationality		Date of Birth	
Place of Birth		Tel. (+country code)	
Skype Name		Best time to contact	
Have you worked in Spain before? YES NO			
Spanish NIE number		Spanish Social Security number	

2. EDUCATIONAL BACKGROUND

University degree/Higher Education Certificate

Name of university/college/institution

Qualifications	Grade	Date	Qualifications	Grade	Date
CELTA			DELTA		
Trinity Certificate			Trinity Diploma		
Other TELF qualifications Which?			PGCE		

Did it involve classroom teaching experience? Yes No How many hours?

Other qualifications:

Institution	Courses	Starting Date	Finishing Date	Qualification/Mark

Have you used an interactive whiteboard? Yes No

3. EMPLOYMENT HISTORY

Present job title		Date of Commencement	
Name of Company			

Duties			
Sizes of class		Ages	
Levels			

Previous TEFL Experience	Organisation/Institution	Start/finish dates	Nationalities, size of class, ages, etc
Non-TEFL experience			
Please give details of any gaps in your work history			

Hobbies/ Interests	
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Languages	Spoken Level	Written Level

Have you taught.....?	YES	NO	Age from	COURSE BOOKS USED	LEVEL
Children					
Teenagers					
Adults					
Lists other materials you use to supplement your teaching					

OTHER TEACHING EXPERIENCE			
1. Director of Studies/Senior teacher		2. Teacher Trainer	
3. Running Seminars		4. Other (special responsibilities) eg. Running a library	

STATEMENT IN SUPPORT OF YOUR APPLICATION

Please use this space to highlight your personal attributes and the reason/s why you are applying for this post.

4. EXAMINATIONS

Do you have experience teaching students preparing for the following examinations?

KET		PET		FCE		CAE		CPE		Trinity	ISE GESE
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5. GENERAL HEALTH

State of health	Please indicate any health problems that we should be informed about eg: epilepsy
	The Disability Discrimination Act defines a disabled person as a "person" who has or has had in the past a physical or medial impairment which had a substantial and long term adverse effect on their ability to carry out normal day-to-day activities. Under this definition, do you consider yourself disabled? YES NO

6. EMPLOYMENT CHECKS

As this post involves working directly with children or young people, you are required to declare whether you have any convictions, cautions or criminal bind overs including those which are "spent". It is a criminal offence to apply for or accept a position working with children if you are excluded from such work by virtue of a court order or exclusion by the Department for Education and Skills (DfES) or the Department of Health (DoH).

		<u>YES</u>	<u>NO</u>
1.	Have you ever been convicted of any criminal offences or been officially cautioned, warned or reprimanded in relation to any such offence?		
2.	Are you included in any list of people barred from working with children by the British Department for Education and Skills (DfES) or the Department of Health (DoH) or the General Teaching Council?		
3.	Have you ever been convicted of any other criminal offence? Please state the nature of the offence.		

Date available for work:

How did you hear about El Centro de Inglés?

Do you have a CBR Check/Spanish "certificado de penales" / ICPC (International Child Protection Certificate)?

In accordance with the Spanish Data Protection Act (15/1999) concerning de Protection of Personal Data, we inform you that the data you provide by completing this application form and/or submitting your curriculum vitae, will be included in the database of EL CENTRO DE INGLES, located at the following address: C/ Caldereros, 7 bajo, 23740 Andújar, Jaén, Spain, in order to select candidates for employment within the aforementioned company. Your personal data may also be passed on to our sister company ECI IDIOMAS BAILEN, S.L. located at the following address: C/ Garcitas, 9, 23710, Bailén, Jaén, Spain for the same purposes.

You have the right to access, cancel or amend the said details by writing to the above address, enclosing a photocopy of a document which proves your identity.

Signed	Date
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7. ADDITIONAL INFORMATION

Current Employer

Company:		
Names of contact:		
Position:		
Address:		
Telephone number:		E-mail:
Dates of employment:		Reason for leaving:
Can we contact this company for a reference ? yes no		

Recent Employer

Name:		
Relationship:		
Address:		
Telephone number:		
E-mail:		
Dates of employment:		Reason for leaving:
Can we contact this company for a reference ? yes no		

Character reference referee

Name:		
Company:		
Address:		
Telephone number:		
E-mail:		
Dates of employment:		Reason for leaving:
Can we contact this person for a reference ? yes no		

If you would prefer us to check references after the interview stage, please indicate here.