

# KINGS MATRICULATION SCHOOL



**ACADEMIC**

**STAFF APPLICATION FORM**

Position Applied For:

**PERSONAL DETAILS- Please complete all sections in BLOCK CAPITALS**

Name:  
(in full)

Sex : Male:

Female:

Date of Birth :

Qualification

:

Marital status:

Experience

:

No. of years :

(Experience certificate available)

Nationality

:

Mother Tongue:

Languages known

:

Hobbies & Interest

:

Sports & Games

:

Can you operate a Computer:

Current Salary:

Contact Details

:  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Postcode: \_\_\_\_\_ Country \_\_\_\_\_  
Telephone: \_\_\_\_\_ Mobile \_\_\_\_\_  
E-mail : \_\_\_\_\_

**SUBJECTS WHICH THE APPLICANT IS PREPARED TO TEACH**

Main Subject

:

Subsidiary Subject :





**REFEREES-Please give details of two referees. One should be your present /last employer**

Name:  Position:

Contact Details:

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ E-mail \_\_\_\_\_  
Telephone: \_\_\_\_\_ Mobile \_\_\_\_\_

Name:  Position:

Contact Details:

Address \_\_\_\_\_

Postcode \_\_\_\_\_ E-mail \_\_\_\_\_  
Telephone \_\_\_\_\_ Mobile \_\_\_\_\_

**HEALTH**

To the best of your knowledge, do you have any medical condition of which the school should be aware (ex., tuberculosis, HIV positive, diabetes)? If the answer is yes, please give brief details below.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REHABILITATION OF OFFENDERS**

The following declarations are required

- I have Yes / No been dismissed from a school or employment due to incompetence or committing illegal acts.
- I have Yes / No criminal convictions

I confirm that all the information given in this form is correct and I understand that it will be used in the selection process. I understand that misleading or incorrect information may be sufficient grounds for the immediate cancellation of any agreements made.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_