Application for Employment for the Teaching Service Ministry of Education and Human Resource Development

This application form is designed specifically for employment in the teaching service. In order to be called for interview, each applicant must submit a completed form ensuring that all relevant information is provided.

Personal Information:			
Name: Surname	First Name	Middle Name	Male ☐ Female
Address:			
Date of Birth:		Age at last birthday:	
Home Telephone number	Cell	Emergency Contact (Name and Tel)	Email Address
Nationality	Dominican	Other	y)
Have you resided out of Dominica?	Yes	If yes, which country or countries? Period of residence abroad	
Are you currently employed?	Yes	Current employment number (if any) Name, address and telephone of firm	
Area of interest:	Secondary P	rimary Early Childhood	
If Secondary, please indicate subject Have you had previous teaching exp If yes, please indicate school(s)			
Period of engagement _			
Provide below a brief summary of yo	our reasons for wanting to	be a teacher	

Educational History						
Please tick highest level Provide educational history				College	University	
Secondary Education		Date	Date	Qualifications atta	ained (list CXC o	related
Name of institut	ion	Commenced	Completed	subjects and grad		- Totalou
Tertiary and Higher	Education					
Name and Address of Institution	Cour	se of Study	Date Commenced	Date Completed/ expected to complete	Qualifications Attained/to be attained	Grade/Class of Award (if necessary)

Employment History
Please state the two most recent jobs held (if any)
Employer 1:
Address: Tel:
Dates: From To
Position Held:
Responsibilities/Primary Duties:
Reason for Leaving:
Termination of employment Pursue further studies New employment offer elsewhere
Other, Please specify
Employer: 2
Address: Tel:
Dates: From: To:
Position Held:
Responsibilities/Primary Duties:
Reason for Leaving:
Termination of employment ☐ Pursue further studies ☐ New employment offer elsewhere ☐
Other, Please specify
Additional experience and qualifications
Are you computer literate? Yes No
What ICT Training have you undertaken?
With which of these areas in ICT are you familiar?
If you are familiar with office applications please indicate which software

Cive details of professional configurate hold (if any)
Give details of professional certificates held (if any)
List special skills which you possess (if any)
List special skills willow you possess (ii driy)
List professional development training (if any)
City details of your appaid interests on hobbins (if app)
Give details of your special interests or hobbies (if any)
Give details of community involvement (if any)
Give details of confinding involvement (ii any)
Give details of any special awards received (scholarships included)

List the names of tv	vo (2) persons not directly related to yo	ou who co	ould be used as references (pas	st employers acceptable)
Reference 1				
Name:	Last		First	Middle
Address:				
Telephone:	Home		Mobile	
Occupation:				
Reference 2				
Name:	Last	First		Middle
Address:				
Telephone	Home		Mobile	
Occupation:		1		
Additional Informa	ation	_		
	TTACH A VALID POLICE RECOR	RD WITH	H PHOTO ID ALONG WITH	YOUR APPLICATION
	CE	RTIFIC	ATION	
Please complete	e the certification below.			
an investigation active considera for rejection of	responses on this application are true and disclose untruthful or misleading answation for employment. I further unders application, withdrawal of an employment is based on misleading	wers, my stand tha oyment	 application may be discarded t misrepresentation of informati offer or recommendation for 	and my name deleted from on shall be sufficient cause
I understand tha	at this employment application does not	t constitu	ute an employment contract.	
Name of Applica	ant:	_	Signature:	
Date		-		

AUTHORIZATION FOR RELEASE OF INFORMATION

, an applicant for employment within the teaching service, do hereby authorize a			
eview of all records or information concerning myself to relevant staff of the Ministry of Education and Human Resource			
Development for the sole purpose of employment within the teaching service, whether the said records are of a public of			
rivate nature.			
The intent of this authorization is to give my consent for disclosure of all records and information of educationa			
stitutions; employment and pre-employment records, including background reports, efficiency ratings, complaints of			
rievances filed by or against me, either criminal or civil, in which I have, or have had any interest or involvement.			
understand that any information obtained during any background investigation upon this authorization will be considered			
n determining my suitability for employment. I further release said person(s) and entities from any liability which may be			
ncurred as a result of furnishing such information.			
you have resided out of Dominica for longer than six (6) months, please attach with this application, a valid police record rom the country of residence.			
lame Signature			
Date			

Please note that the information received from applicants will be utilized for office purposes only and shall not be disclosed to any other party without the expressed authority of the applicant.

Completed application forms, along with certified copies of ALL relevant certificates should be forwarded to:

Permanent Secretary
Ministry of Education and Human Resource Development
Government Headquarters
Roseau
Dominica

OR

Chief Education Officer
Ministry of Education and Human Resource Development
Education, Science and Technology Building
Cornwall Street
Roseau
Dominica

Ensure that the application form is completed in clear print and that your signature is affixed to the final page. Applicants will NOT be called in for an interview without certified copies of relevant certificates. Note that except in cases of emergency, interviews will only be conducted once per Academic Term. Thank you for expressing interest in the teaching profession.