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| Heart of Teaching | | | | |
| Michael Hall Full-Time Teacher Training Course Application Form | | | | |
| We will hold your personal data on our database in accordance with the Data Protection Act 1998. | | | | |
| This information may be accessed and reviewed for administrative purposes only. | | | | |
| Personal Details (\*please complete all fields) |  |  |  |  |
| \*Surname |  |  | \*Male | \*Female |
|  |  |  |  |  |
| \*First name(s) |  |  | \*Date of birth |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Permanent home address (\*please complete all fields) | Correspondence address (if different) | | | |
| \*Address |  |  | Address |  |
|  |  |  |  |  |
| \*Town |  |  | Town |  |
| Postcode |  |  |  |  |
| \*Email |  |  | Email |  |
| \*Telephone |  |  | Telephone |  |
| \*Mobile |  |  | Mobile |  |
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|  |  |  |  |  |
| Nationality |  |  |  |  |
| Please State | Is English your first language? Yes No | | | |
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|  |  | | | |
| Please give details of present/most recent employer | Please give details of previous employer | | | |
| Employers name |  |  | Employers name |  |
| Employers address | Employers address | | | |
|  |  | | | |
| Town |  |  | Town |  |
| Postcode |  |  | Postcode |  |
| Email |  |  | Email |  |
| Telephone |  |  | Telephone |  |
| Date started |  |  | Date started |  |
| Date left |  |  | Date left |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Please give details of previous employer | Please give details of previous employer | | | |
| Employers name |  |  | Employers name |  |
| Employers address | Employers address | | | |
|  |  | | | |
| Town |  |  | Town |  |
| Postcode |  |  | Postcode |  |
| Email |  |  | Email |  |
| Telephone |  |  | Telephone |  |
| Date started |  |  | Date started |  |
| Date left |  |  | Date left |  |

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| Steiner Waldorf Education/Anthroposophy |
| Please detail your experience of, and interest in, Steiner Waldorf Education and state why you wish to attend this course. |

# Career Aspirations

What are your career aspirations?

# Educational, Academic and Professional Qualifications

List, in chronological order, educational/academic establishments attended. Please give dates of attendance and course(s) completed with title and grade of award. Please enclose photocopies of all relevant further education (post 'A'

level) certificates/award with the completed application form.

Secondary Education

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| --- | --- | --- | --- |
| Dates | School/College | Qualification | Subject/Grade |
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Completed Further/Vocational Education (if any)

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| --- | --- | --- | --- |
| Dates | College/University | Qualification | Subject/Grade |
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The course Leaders will take up 2 references with regard to this application. Please provide one personal and one professional referees.

Professional referee Name

Company Name Position in company

Address

Relationship to you

Length of time known

Post Code Email

Telephone

Personal referee Name

Address

Relationship to you

Length of time known

Post Code

Email Telephone

I declare that the information contained within the application is, to the best of my knowledge and belief, true and correct in every particular. I authorise the taking up of references in connection with this application.

Signed Date

Please send your Application Forms by email to: Renata.harkness@michaelhall.co.uk

Please send your Application Forms by post to: Renata Harkness, Course Coordinator

The Heart Of Teaching, Kidbrooke Park

Forest Row

East Sussex RH18 5JA

**DBS Checks**

Please note, on acceptance onto the Heart of Teaching course we will ask you to fill in a DBS Application Form. <https://www.gov.uk/disclosure-barring-service-check/documents-the-applicant-must-provide->

*“Michael Hall School is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.”*

Kidbrooke Park, Forest Row, East Sussex RH18 5JA. Tel: 01342 822275 Fax: 01342 826593 [www.theheartofteaching.co.uk](http://www.theheartofteaching.co.uk/) Company number 539034. Registered charity number 307006