Edu-Kingdom College Teacher Application Form

First Name				Surname		
Gender		Male	Female			
Date of Birth				WWCC No.		
Phone No.	(Home)			(mobile)		
Postal Address					Postco	de
Currently teaching at (name of school)						
Subjects (please state to what level. e.g. Year 12)						
Primary						
High School						
Formal Qualifications						
Work experiences (incl. Coaching experiences)						
School						Years
Coaching						Years
Please state the days and times preferred (if any) : Time :						
Mon	Tue	Wed	Thur F	ri Sat H	oliday ESL _	
Other comme	ents					
PLEASE NOTE: IT IS AGAINST OUR POLICY FOR THE TEACHER TO PRIVATELY TUTOR ANY OF THE STUDENTS FROM OUR COLLEGE.						
PLEASE READ THE CONDITIONS CAREFULLY BEFORE SIGNING. 1. There is a 2 month provisional period for all new teachers as we assess their suitability to our college. 2. Teachers are required to give a minimum of 1 MONTH notice before resigning. 3. If for some reason you cannot attend the class, it is your responsibility to arrange for a relief teacher who can competently teach in your place. 4. In case of absence, you must let the office know as soon as possible. 5. Edu-Kingdom College are kept confidential. I agree to comply with the conditions stated above. Signed						
Signed				Dat	e:	

The above information will be kept strictly confidential (with the exception of experience and name of the school) and we will be happy to keep any information confidential if our teachers request it.

