



APPLICATION FOR PROMOTION TO ADMINISTRATIVE OFFICES IN THE TEACHING SERVICE

Application will **only** be considered complete when accompanied by a current Special Report and copies of the relevant documents.

PLEASE TYPE OR PRINT CLEARLY

Submit to: The Permanent Secretary, Attention: Senior Human Resource Officer (Primary) / Senior Human Resource Officer (Secondary) (where applicable), Ministry of Education, 18 Alexandra Street, Port of Spain (ufs Principal/School Supervisor III)

1. PERSONAL INFORMATION				
Office applied for and the schools of interest under this circular memorandum.				
Office:				
School 1:		School 2:		
School 3:		School 4:		
Ref. Circular Memorandum No.:		Date: (d/m/y)		
Last Name:		First Name:		
Maiden Name:	Middle Name:	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> (Mr, Mrs, Miss, Ms, Dr. other-specify)		
Telephone (Home):	Telephone (Mobile/Work):	Marital Status:		
Birth Date: (d/m/y)	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Date entered service (d/m/y):		
Substantive Office (include area of specialization):		Registration No.		
Date of appointment: (d/m/y)		Salary Grade:		
Indicate the last two positions for which you have been previously interviewed in the last 12 months:				
1.....2.....				
I wish/do not wish to be re-interviewed for				
Mailing Address:				
Fax No.:		Email Address:		
Country of Birth:		Nationality:		
2. EDUCATION & PROFESSIONAL QUALIFICATIONS				
<i>Enter details of any professional and tertiary qualifications, such as degrees, certificates, diplomas and short courses.</i>				
Institution and Address	Date Attended		Qualification/Year Obtained	Other relevant information
	From	To		

3. SERVICE RECORD / EMPLOYMENT HISTORY

Please start from the most recent and include acting appointments

Office	Institution	From	To	Duties (describe briefly)

4. OTHER EXPERIENCE/SKILLS

Indicate any relevant training and expertise you have in specialized areas e.g. computing, communicating, writing, speaking

Experience/Skill area	Period	Comments

5. MEMBERSHIPS

List membership in any professional organization or civic body such as military

Name of Organization	Office	Period

I declare that the information in this application is true to the best of my knowledge and that failure to provide same will result in my application not being considered.

Applicant's Signature: _____ Date: _____