

Whitney Institute Middle School

59 Middle Road
Smith's FL04
Bermuda



Established 1883

Principal: Miss Reeshemah Swan. B.A., M.A.T.

Telephone: 441-292-1021

APPLICATION FOR A FACULTY POSITION

Start Date: September 20_____

Job Title as Advertised: _____

Advertisement Reference No: _____

Specific Title/Subject Area: _____

1. PERSONAL DETAILS:

Last Name: _____ First Name: _____ Middle Initial: _____

Current Age: _____ Date of Birth: _____ / _____ / _____
D M Y

Telephone No.: Home: _____ Other: _____

E-mail Address: _____

Home Address: _____

Mailing Address: *(if different from home)* _____

ARE YOU BERMUDIAN? Yes No If No, please state nationality: _____

ARE YOU LEGALLY MARRIED? Yes No If Yes, are you married to a Bermudian? Yes No

2. EDUCATION (TO BE COMPLETED BY ALL APPLICANTS IN FULL)

Schools, Colleges, Universities attended	Full/ Part-time	Entered	Left

3.

Academic, Professional, Technical qualifications obtained (in full) (Courses related to employment being sought must be supported by certified / notarised certificates together with official transcripts)	Date Obtained

4.

Special courses undertaken relative to the post applied for:
(Courses related to employment being sought must be supported by certified certificates)

5. NAME AND ADDRESS OF PRESENT EMPLOYER (All information given under section 5 will be treated in strict confidence).

Post Held: _____

Current Pay: _____ Date Commence _____

Reason for wishing to leave: _____

6. PREVIOUS EMPLOYMENT

Name and Address of Previous Employer	Post Held	Pay on Leaving	Date Started	Date Left	Reasons for Leaving

7. PROFESSIONAL REFERENCES: Provide TWO references that have been either your supervisor or manager but are not a relative. Please ensure that these references will be willing to provide relevant information if requested to do so.

Name: _____ Name: _____

Address: _____ Address: _____

Working Relationship to you: _____ Working Relationship to you: _____

Current position held: _____ Current position held: _____

Day Telephone No.: _____ Day Telephone No.: _____

8. Are you in receipt of a pension earned from Bermuda Government employment? Yes No .

9. Have you ever been convicted by a court of Law in Bermuda or elsewhere? Yes No

If yes, please give details below:

10. Questionnaire

Please answer the following seven (7) questions below:

1) What are your three (3) most important reasons for wanting to be a teacher?	
2) How much do you want to know about your students in order to be most helpful to them?	
3) What three (3) things do you most want to know about your students?	
4) What do you need to know in order to begin your lesson planning for a class?	
5) What four (4) key components do you believe you must include in your plan?	
6) When you think about your students, in what major ways do you most want to influence their lives?	
7) What two core teaching strategies do you most use to achieve this result?	

11. NOTICE TO APPLICANTS:

The Whitney Institute Middle School is “under the control and management” of the Board of Governors of the Whitney Institute and all persons appointed to positions at the school are subject to the authority of the Board of Governors. Further, the Permanent Secretary for Education must ultimately approve all appointments.

Note that all applications received will be considered, and selected applicants will be interviewed. The complete application process may take several weeks.

I CERTIFY, to the best of my knowledge, that the information contained in this application is a true and factual record and I understand that should the information provided prove to be incorrect or misleading, then the appointment, whether offered or in effect, may be cancelled.

Did your Teacher’s certification course include a minimum 12-week practical teaching component? Yes No

Location of Teaching Practicum: _____

Area of Teaching Certification: _____

12. (To be completed by Non Bermudians)

Please answer the following questions

1) If you are successful in securing a position, will you be coming to Bermuda alone? Yes No

If no, who will be accompanying you to Bermuda and what is the age and relationship of the individual(s) to you?

(If a child, state if this child has any special needs, if the child is your biological or adopted child, if a spouse, please state their occupation and what is their educational background.)

Spouse Name _____ Occupation _____

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

Please note that the Bermuda Department of Immigration restricts the number of underage (18) dependants to 2.

As a non-Bermudian, your employment will be subject to a work permit approval and you may require a Visa to enter Bermuda.

2) All newly appointed teachers must undergo a probationary period for an academic year. Is there anything that would prevent you from working consecutively during this period? Yes No

If yes, please explain: _____

3) Please indicate whether you are able to commit to a three year contract with the Department of Education: Yes No

4) Please provide the name and address of the statutory authority that issued your certificate to teach: _____

Certificate number _____ Expiry Date _____

5) Has your certificate of registration and qualification with this statutory authority been cancelled? Yes No

If yes, when and why? _____

6) Is your acceptance of employment with the Department of Education contingent on any factors? Yes No

If yes, please disclose: _____

Please note that *if you are short listed for a position*, we will require an official copy of your academic transcripts sent to us via email to Principal Swan rswan2@moed.bm or Administrative Assistant lasimmons2@moed.bm.

Date: _____

Signature: _____