

SPECIAL CHARACTER POSITION FORM
Schedule 6, Clause 47, Education and Training Act 2020
 (Previously – Education Act 1989, Section 464)

APPLICATION FOR A POSITION RELATED TO SPECIAL CHARACTER IN A CATHOLIC SCHOOL

A. POSITION BEING APPLIED FOR

Position: <i>(please circle position applying for)</i>		
CI 47 (a): Principal	CI 47 (b): Director of Religious Studies	CI 47 (c): Other teaching position
School:		
Address:		

B. PERSONAL

First Names:	
Surname:	
Address:	
Religion:	
Telephone Number Day:	Evening:
e-mail:	

C. PARISH

1.0 Are you a member of a Catholic parish community? Yes No

If yes, name and address of parish:

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2.0 Are you involved in parish ministry? (eg. Youth Ministry, Ministry of Word, Eucharist, Hospitality, Service, Liturgy) Yes No

If yes, name of Ministry or Service

.....

D. QUALIFICATIONS OR COURSES IN RELIGIOUS EDUCATION AND/OR THEOLOGY

(See [Notes](#))

Qualification/Course Attended (Include your Certification for Teachers in Catholic Schools if applicable)	Institution and Year

Duplicate and attach relevant CV material or certificates etc as appropriate.

3.0 If you are a beginning teacher, were you associated with a Catholic school as part of your practice teaching professional training? Yes No
 If yes, name and address of school(s):

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E. PREVIOUS TEACHING EXPERIENCE RELATED TO THE SPECIAL CHARACTER OF A CATHOLIC SCHOOL

Position	School	Year Level	From	To

F. OTHER QUALIFICATIONS & EXPERIENCE RELEVANT TO THE SPECIAL CHARACTER OF A CATHOLIC SCHOOL (See Notes)

G. CATHOLIC CHARACTER REFEREES Please provide three referees. At least one referee must be a priest, ethnic chaplain or lay pastoral leader who is familiar with your religious practice. (See [note](#) on referees.)

1	Name		Phone: Day	
	Address		Night	
			Mobile	
Email				
2	Name		Phone: Day	
	Address		Night	
			Mobile	

	Email	
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3	Name		Phone: Day	
	Address		Night	
			Mobile	
Email				

I acknowledge and accept that the information I have supplied will be used by the Proprietor (Board of Trustees in secondary schools) in terms of Education and Training Act 2020, Schedule 6, Cl 47 to assess my **acceptability** for the position as defined in the Act, and also by the Board of Trustees to determine my **suitability** for the position as defined in the Act. I have read the information in this document that explains acceptability.

Signed: Date: