

**APPLICATION FOR TEACHER**

Note: The personal data collected in this application form will be used to assess the applicant’s suitability to assume the job duties of the position to which he/she has applied and to determine the remuneration subject to selection for the position. The data held by VSA will be kept confidential but upon appointment the information will be retained and divulged to other relevant departments within VSA personnel-related administration. The personal data of unsuccessful applicants will be retained for future recruitment purposes for a period of two years.

Fields marked with “ \* ” are optional.

|  |  |  |
| --- | --- | --- |
| **Section 1 : Personal Details** | | |
| Surname : | Given Name : Name in Chinese (if any) (中文姓名): | |
| Date of Birth: | \*Gender: ❑M ❑F | |
| Nationality : | First Language : |  |
| Home Address : | | |
| Home Telephone : Mobile: E-mail : | | |
| \*Marital Status: ❑ Single ❑ Married; \*Number of Children: \_\_\_\_\_\_\_\_\_ Age(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| If you are currently staying in HK, please state your status:  ❑ HK Permanent Resident ❑ Work Visa Holder ❑ Dependent Visa Holder | | |
| Do you have any criminal records? ❑ No ❑ Yes, please specify the details \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Have you ever had a safeguarding concern raised about you? ❑ No ❑ Yes  I have read the VSA Safeguarding Policy <https://www.vsa.edu.hk/en/Safeguarding_en.aspx> ❑ No ❑ Yes | | |
| Teacher’s Registration / Permit No. (if applicable): (Granted by: ) | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Section 2 : Education and Qualifications (including Primary, Secondary and Tertiary Education)** | | | | | | | |
| **Qualifications** | **Name of Institution** | **Specialist/**  **Major Subject (s)** | **Date Commenced** | **Date**  **Awarded** | **Please indicate** | | |
| **F/T** | **P/T** | **Ext** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Other Professional**  **Qualifications/Certificates** | **Awarding Body** | **Specialist/**  **Major Focus** | **Date Commenced** | **Date**  **Awarded** | **Please indicate** | | |
| **F/T** | **P/T** | **Ext** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

|  |
| --- |
| **Professional Training undertaken since qualifying including specific IB training. (Please state dates, duration and location)** |
|  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Section 3 : Work Experience as a Qualified Teacher (in date order from current appointment)** | | | | | | | |
| **Position Held** | **Full-Time / Part-Time**  **(if PT, state fraction)** | **School Name and Address** | **Please “√” if it’s IB School** | **Age Range/s Taught** | **Period of service** | | **To be completed by VSA** |
| **From**  **(month /year)** | **To**  **(month /year)** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  | Total |  |

Confirmed by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Section 4 : Remuneration** | | |
| **Please state the remuneration package in your current / last # employment #** *Please delete as appropriate.* | | |
| **Monthly Basic Salary** | **No. of months per year** | **Other fixed Allowances / Fringe Benefits / Gratuity (Please specify)** |
|  |  |  |

**Housing / Housing Allowance provided? ❑ No ❑ Yes Current contract expiry date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Expected Salary (per month): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |
| --- | --- | --- | --- |
| **Section 5 : Referees** | | | |
| **Please provide TWO professional present referees. By filling in the following information, you are giving your consent for Victoria Shanghai Academy to contact the referees.** | | | |
| A. | Name |  | |
|  | Position |  | |
|  | Company Name |  | |
|  | Telephone |  | Email |
| B. | Name |  | |
|  | Position |  | |
|  | Company Name |  | |
|  | Telephone |  | Email |

I understand that if I willfully give any false information or withhold any material information in this application form, or fail to notify the recruiting department any subsequent change of information provided, it will render me liable to disqualification for employment or termination of employment, if already employed.

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**