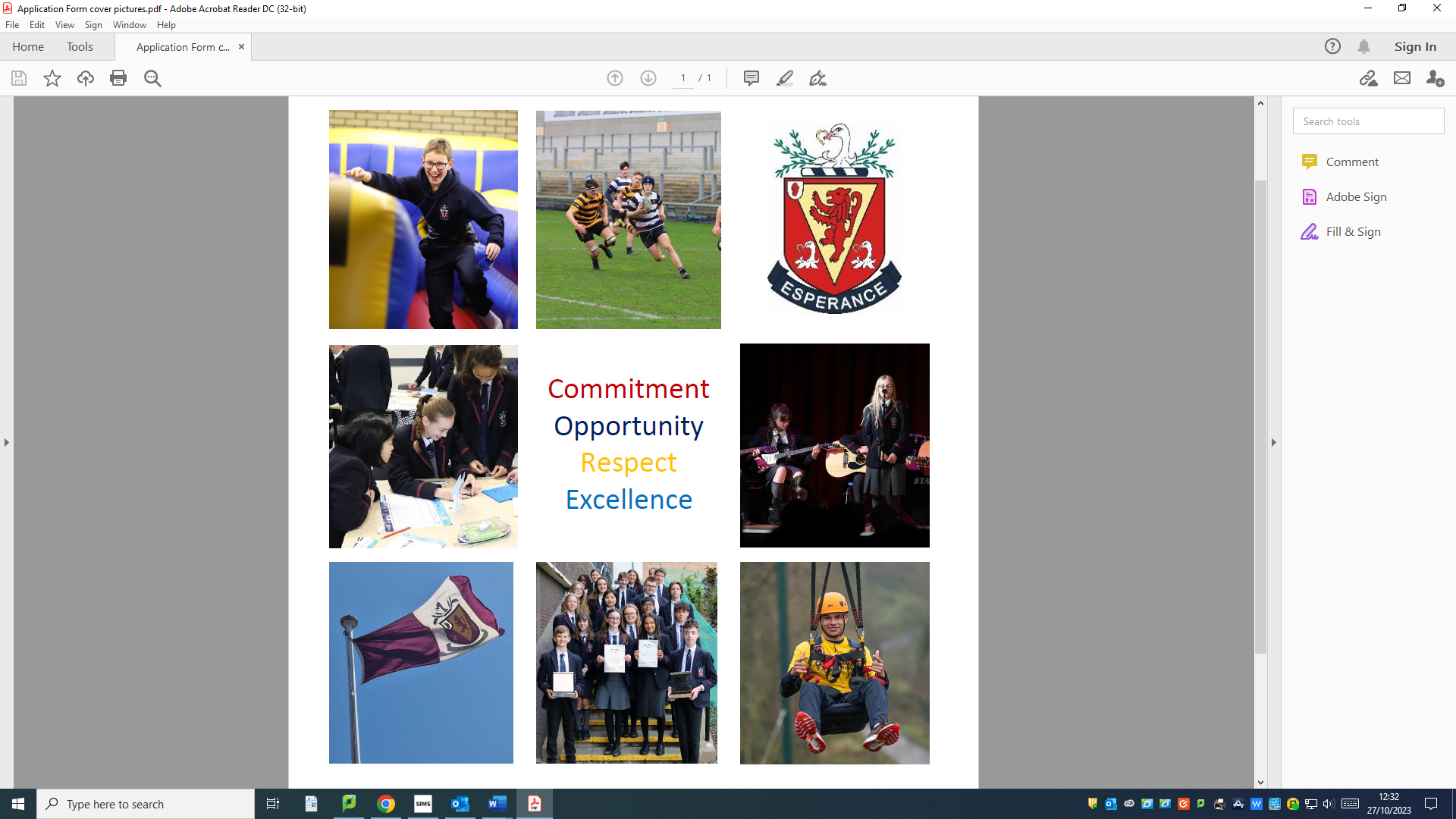
**The Wallace High School**

**Application Form**



Post: **Permanent Part Time** **Teacher of Art and Design**

Post Begins: **3 November 2025**

Closing Date: **Monday, 18 August 2025 at 12 midday**

**The Wallace High School**

The Wallace High School is a co-educational voluntary grammar school situated in a pleasant residential area of Lisburn. It was founded in 1880 by a bequest from the estate of Sir Richard Wallace, local landowner and MP.

The School enjoys an excellent academic record both locally and nationally. The strong pastoral system ensures that individual pupils benefit from the support and guidance of their class tutor who monitors academic progress and general welfare. Through its curricular programme, wide range of extra-curricular activities and the expertise of well trained, specialist teaching staff, the School provides a balanced educational experience, encouraging pupils to discover and develop their particular talents, and preparing them for the opportunities and responsibilities of adult life referred to as ‘The Wallace Way’.

A strong emphasis is placed on extra-curricular activities, and a wide range of clubs and societies meet regularly. Pupil involvement is encouraged in music, drama and debating, while success is enjoyed by School teams playing rugby, hockey, tennis, athletics, badminton, netball and cricket. Pupils also benefit from the many opportunities afforded to them through School trips and visits, and through involvement in community service.

The School has recently invested in major enhancements such as new extensions and sports facilities, but the commitment at Wallace High School still remains to maintain high standards and maximise the potential of each individual pupil. The School has a strong reputation for innovation in the use of digital technology in learning.

**Instructions to Applicants**

Please read this before you complete the application form.

* Please do not attach additional sheets to this form. Covering emails/letters and CVs will not be considered by the panel.
* Please complete the form in Calibri font 12.
* Application forms should be emailed in Word format to [recruit@wallacehigh.net](mailto:recruit@wallacehigh.net). An acknowledgement will be sent by return of email.
* If shortlisted, you will be asked to sign the printed application form at interview, and present a form of photographic identification.
* Applications received after the closing date/time will not be accepted.
* It is up to the candidate to demonstrate on the application form how they meet each criterion.

**SECTION 1: PERSONAL INFORMATION**

**Office use only:**

Ref: 2025/ArtDesign/………

**Office use only:**

Ref: 2023/Physics/……….

|  |  |  |  |
| --- | --- | --- | --- |
| **Title** |  |  |  |
|  | | | |
| **First name** |  | **Middle name(s)** |  |
|  | | | |
| **Surname** |  | **Date of Birth** |  |
|  | | | |
| **Mobile number** |  |  | |
|  | | | |
| **Email address** |  | | |
|  | | | |
| **Address** |  | | |
|  | | | |
| **National Insurance No** |  |  | |

**SECTION 2: DETAILS OF PRESENT EMPLOYMENT**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name and address of present employer** | | |  | | |
|  | | | | | |
| **Post held** |  | | | | |
|  | | | | | |
| **Current salary** |  | | | **Teaching Scale/Responsibility Points** |  |
|  | | | | | |
| **Main Duties** |  | | | | |
|  | | | | | |
| **Period of notice required** | |  | | | |



**SECTION 3: PREVIOUS EMPLOYMENT**

Please provide the details of previous employment, starting with the most recent.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name and address of employer** | **Job Title** | **From** | **To** | **Reason for leaving** | |
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Please explain any gaps in your employment history:

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| --- |
|  |

**SECTION 4: EDUCATION**

Please list below your A Level or equivalent, degree and postgraduate qualifications, grades or levels and the dates awarded.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of School/College/University** | **Qualification** | **Grade/Level**  **(if appropriate)** | **Date Awarded** |
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**SECTION 5: MEETING THE CRITERIA**

Please indicate below how you meet the following criteria which are either essential or desirable (if not met please leave blank).

|  |
| --- |
| **Essential Criteria**  **Applicants must (as of 1 September 2025):** |
| have a good honours degree (2:2 minimum) in which Art and Design is a major component. |
|  |
| be a qualified teacher recognised by the Department of Education (NI) and be registered with the General Teaching Council for Northern Ireland by 1 September 2025 or by the time of appointment. |
|  |
| be able to demonstrate the effective use of ICT in learning and teaching. |
|  |
| show ability and be willing to contribute to an extra-curricular activity offered by the school |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| GTCNI Number |  | DE Teacher Reference |  |

|  |
| --- |
| **Desirable Criteria**  **Preference may be given to candidates who (as of 1 September 2025):** |
| have experience of teaching Art and Design to GCSE. |
|  |
| have experience of teaching Art and Design to A Level. |
|  |
| have experience of teaching Moving Image Arts to GCSE. |
|  |

**SECTION 6: REFEREES**

Please provide two referees. **One referee should be your current Principal**. If you are currently not working in a school, please include the Principal of the last school in which you worked.

Please ensure that you have notified your referee that you have listed their name. Depending on the post advertised, references may be called at any stage during the recruitment process.

|  |  |  |  |
| --- | --- | --- | --- |
| **Referee 1** | | **Referee 2** | |
|  | | | |
| Name |  | Name |  |
|  | | | |
| Job Title |  | Job Title |  |
|  | | | |
| Organisation and address |  | Organisation and address |  |
|  | | | |
| Email address |  | Email address |  |
|  | | | |
| Telephone number |  | Telephone number |  |

**SECTION 7: CRIMINAL OFFENCES**

|  |
| --- |
| Please give details of any convictions or cautions from criminal offences (including nature of offence and sentence). A Criminal Record will not necessarily be a bar to an applicant obtaining a position, any Disclosure Information will not be used unfairly. A copy of the Recruitment of Ex-Offenders Policy is available on request. |
|  |

**SECTION 8: DISCLOSURE**

|  |  |  |  |
| --- | --- | --- | --- |
| Are you aware of any issues or circumstances which the School, concerned for the welfare of its under age and young adult pupils and the protection of its reputation, might reasonably be expected to consider relevant to your engagement, continued employment, conduct and performance? (Please ✓ the appropriate box). | | | |
| Yes |  | No |  |
| If yes, please supply all relevant details. | | | |
|  | | | |
| Is there any reason why you cannot work in Regulated Activity? (Please ✓ the appropriate box)  Please refer to: <https://www.justice-ni.gov.uk/articles/disclosure-and-barring> for further information. | | | |
| Yes |  | No |  |
| If yes, please supply all relevant details. | | | |
|  | | | |

**SECTION 9: DECLARATION**

Shortlisted applicants will be asked to sign the application form at the interview stage.

I certify that the information supplied by me in this application is correct to the best of my knowledge.

I understand that prior to an appointment being confirmed, a criminal records check will be made on me for the purposes of fulfilling the requirements of the DENI Circulars 2006/06 “Child Protection: Recruitment of People to work with Children and Young People in Educational Settings” and 2008/03 “Child Protection: Pre-Employment checking of persons to work in schools – new arrangements”. I give my permission for this to be done.

I certify that I am not disqualified from working with children or subject to sanctions imposed by a regulatory body which would restrict me from applying for this post.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature** |  | **Date** |  |



**PLEASE CONTINUE TO SECTION 10**

**SECTION 10: EQUAL OPPORTUNITIES QUESTIONNAIRE**

**Office use only:**

Ref: 2025/ArtDesign/…….

**This form will be detached from your application form and anonymised.**

Please complete the following information by inserting an X in the appropriate box.

**Gender**

|  |  |  |  |
| --- | --- | --- | --- |
| Female |  | Male |  |

**Community Background**

|  |  |
| --- | --- |
| I have a Protestant community background |  |
|  |  |
| I have a Roman Catholic community background |  |
|  |  |
| I have neither a Protestant nor a Roman Catholic community background |  |

**Disability**

Disability is defined as a physical or mental impairment which has substantial and long term adverse effect on the individual’s ability to carry out normal day-to-day activities. Do you consider yourself you have a disability?

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

**Race**

Please indicate your racial origin by marking an X in the appropriate box

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| White |  | Chinese |  | Irish Traveller | | |  |
|  | | | | |  |
| Pakistan/Bangladeshi |  | Indian |  | Black Carribean | | |  |
|  | | | | |  |
| Black African |  | Other |  |  | | |  |
|  | | | | |  |
| Ifother, please specify | |  | |  | | | |

**Sexual Orientation**

Please indicate your sexual orientation by marking an X in the appropriate box

|  |  |
| --- | --- |
| My sexual orientation is toward someone of the opposite sex. |  |
|  |  |
| My sexual orientation is toward someone of the same sex. |  |
|  |  |
| My sexual orientation is toward someone of the same sex and of the opposite sex. |  |

**Marital Status**

Please indicate your marital status by marking an X in the appropriate box

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Single |  | Married | | |  |
|  | | |  |
| In a civil partnership |  | Divorced | | |  |
|  | | |  |
| Formerly in a civil partnership now dissolved |  | Separated by still legally married | | |  |
|  | | |  |
| Separated but still legally in a civil partnership |  | Surviving partner from a civil partnership | | |  |
|  | | |  |
| Widowed |  |  | | |  |

**Dependents**

Please indicate if you have a personal responsibility for the care of a child or children, a person with a disability, or a dependent older person.

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |