# Taipei Jingwen Senior High School

**No. 127, Baoyi Rd., Wenshan Dist.,**

**Taipei City 116, Taiwan (R.O.C.)**

**TEL: (+886) 2 2939-0310 FAX: (+886) 2 2936-3600**

**E-mail to:** siennayang@jwsh.tp.edu.tw

**PLEASE GIVE DATES AS DD/MM/YY**

|  |  |
| --- | --- |
| 1. Title: □ **Mr** □**Mrs** □**Miss** □**Ms**  Marital Status: | 2. Surname:  First Name(s): |
| 3a. Experience of teaching none-native speakers  Countries:  Subjects taught:  Years taught: | 3b. Experience of teaching native English speakers  Countries:  Subjects taught:  Years taught: |

|  |  |
| --- | --- |
| 4a. Full Postal Address (including post code and country) | 4b. Residential Address (if different from 4a) |
| 5. Telephone No: (please include the full country and area code with all numbers)  Home No: Work No:  Fax No: Other contact No. | |
| 6. Email Address: | |

|  |  |  |
| --- | --- | --- |
| 7a. Date of birth:  7b. Place of birth | 8. Age: | 9. Nationality: |
| 10a. Passport Number: 10c. Date of Issue: 10d. Place of Issue:  10b. Country of Issue (if different from 14) 10e. Expiry Date: | | |
| 11. □ I am holding a spousal ARC (Alien Resident Card). □ I need to apply for an ARC.  Expiry Date: | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 12. Details of Higher Education: *(please list in date order starting with the most recent)* | | | | |
| Institution  (State full or part-time) | Dates attended | Subjects studied | Qualifications obtained | Class of Degree |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. Details of Teaching Qualifications (i.e TEFL, BEd, CELTA etc): *(please list in date order starting with the most recent)* | | | |
| Institution | Dates | Subjects | Qualification |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. Details of any additional Qualifications obtained (i.e. First Aid): *(please list in date order starting with the most recent)* | | | |
| Institution | Location | Dates | Qualification obtained and level |
|  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. Details of Computer Skills *(please check relevant boxes)* | | | | |
| □ Word | □ Excel | □ PowerPoint | □ Dreamweaver | □ Corel Video Studio |
| □ Flash | □ Corel Draw | □ Illustrator | □ Front Page | □ Impact |
| □ C/C++ | □ Lunix | □ VB | □ IT system maintenance | □ Other \_\_\_\_\_\_\_\_\_\_ |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. Details of your current employment position: (State ‘n/a’ where columns do not apply) | | | | | | |
| Employer / name of school or company | Country | Post  State full time or part time | Dates | No. on roll | Ages taught | Current Salary |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| 1. Appointments to Taipei Jingwen Senior High School are subject to medical and police checks. As this post involves working with children, positions are only offered to candidates who declare accurate and truthful information on this form. | |
| Do you have any criminal convictions? | □**YES** □**NO** |
| Do you have any criminal case against you pending? | □**YES** □**NO** |
| Do you know of any reason why you may not be allowed to work with children? | □**YES** □**NO** |
| If you answered YES to either of the above, please give details: | |

|  |  |  |  |
| --- | --- | --- | --- |
| 18. Referees: Please provide details of **TWO** professional referees (preferably not from the same school unless unavoidable). Your first reference must be your current employer, and preferably the Head of the Institution. | | | |
| Name | Position / Standing | Address | Contact Details |
| 1. |  |  | Tel:  Fax:  Email: |
| 2. |  |  | Tel:  Fax:  Email: |
| Please note that we reserve the right to approach your current employer. | | | |
| 19. Recent photo: | | | |
| **Declaration:**  **I declare that the information given in this form is true and accurate and I understand that any offer of employment which may be made to me by Taipei Jingwen Senior High School is subject to this declaration.**  **Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | |