

*For office use only*

*Student No:*

**Assessment Only Route to Qualified Teacher Status (QTS)**

*You will need to send a* ***copy of ID with this application form and copies of your certificates.***

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| **Personal details** |
| Title:Dr [ ]  Mr [ ]  Mrs [ ]  Miss [ ]  Ms [ ]   | Surname / Family name (as it appears on official documentation):Click or tap here to enter text. |
| First name (s):Click or tap here to enter text. | Previous surname / Family name (if changed):Click or tap here to enter text. |
| Correspondence address:Click or tap here to enter text. |
| Postcode:Click or tap here to enter text. |
| Daytime telephone number:Click or tap here to enter text. | Evening telephone number:Click or tap here to enter text. | Mobile telephone number:Click or tap here to enter text. |
| Email Address:Click or tap here to enter text. |
| Gender:Male [ ]  Female [ ]   | Date of birth:Click or tap to enter a date. |
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| National Insurance No. |

 Click or tap here to enter text. | DBS Number: Click or tap here to enter text.Date of issue: Click or tap to enter a date. |

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| **Age range of route you are applying for** |
| Assessment only route to QTSPrimary 3-7 [ ]  5-11 [ ]  | Secondary 11-16 [ ]  14-19 [ ] Secondary Subject Specialism:Click or tap here to enter text. |  |

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| **Disabilities and Special needs** |
| Please enter appropriate code(s):Choose an item. | Support required:Click or tap here to enter text. |

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| **Ethnic origin (to be completed only if country of permanent residence is in the UK)** |
| *This information is not used in the selection process and is used for statistical purposes only.*Ethnic origin is not the same as nationality, place of birth or citizenship, but about your colour and broad ethnic group.Choose an item. |

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| **Education Qualifications** |
| Please provide details of your education from secondary school onwards.You’ll be required to produce evidence of qualifications. List the most recent first. |
| **Dates attended (month and year)** | **Name and location of school/college/university** | **Qualifications gained (including grades, awarding body and date of award)** |
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| **Training and Professional Development** |
| Please give details of training or professional development courses undertaken that are relevant to your application |
| **Course dates** | **Length of course** | **Course title** | **Qualification obtained** | **Course provider** |
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| **Previous QTS assessment**  |
| If you have previously failed a QTS assessment or withdrawn from a QTS programme please provide a written explanation and also provide the contact details of your previous training provider. The University of Worcester will only accept applicants of the highest quality and be certain that the applicant is now more likely to succeed. |
| Have you failed or withdrawn from a QTS course? Yes [ ]  No [ ]  |
| If yes, give the name of the previous course and providerClick or tap here to enter text. |
| Has the previous provider given a written explanation? Yes [ ]  No [ ] (attach this to your application) |

Applicants applying for the Assessment Only Route must have at least two years full-time teaching experience\*, or the part-time equivalent\*\*, across at least two schools/settings.

\*full-time teaching experience is the responsibility for planning, delivering and assessing the learning of whole classes for at least 50% of a school’s timetable.

\*\* an example of this might be four years’ experience on a 25% teaching timetable.

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| **Candidate’s current teaching position** |
| Employer details (name, address, email and/or telephone) | Job Title | Start date(Including month/year) | Age range taught | Permanent or temporary | Part-time or full-time | Description of responsibilities |
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| **Previous employment as a teacher** |
| Employer details (name, address, email and/or telephone) | Job Title | Dates employed (including month/year) | Description of responsibilities | Reason for leaving |
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| **Personal Statement** |
| To show your understanding of the Assessment Only Route, please explain why you think you are suitable and ready for the Assessment Only Route to QTS. Make links to your capabilities in terms of the Teachers’ Standards (DfE, 2013). Please use no more than two-sides. |
| **References** |
| Please provide the contact details of two referees; the first should be your current school Head teacher or equivalent, the other should be from someone who can vouch for your experience in a previous school. |
| **Referees’ names and addresses**  |
| Name:Click or tap here to enter text. | Name:Click or tap here to enter text. |
| Job Title:Click or tap here to enter text. | Job Title:Click or tap here to enter text. |
| Relationship to you:Click or tap here to enter text. | Relationship to you:Click or tap here to enter text. |
| Address:Click or tap here to enter text. | Address:Click or tap here to enter text. |
| Postcode:Click or tap here to enter text. | Telephone number:Click or tap here to enter text. | Postcode:Click or tap here to enter text. | Telephone number:Click or tap here to enter text. |
| Email address:Click or tap here to enter text. | Email address:Click or tap here to enter text. |

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| **The School** |
| The Headteacher of the school that will assess the applicant should complete this section.  |
| I confirm on behalf of (school name): Click or tap here to enter text.that (applicant name): Click or tap here to enter text.will work as a teacher at this school during the proposed assessment period. * The school has confirmed the applicant’s fitness to teach and that the applicant has a current enhanced DBS clearance. A copy of the school’s most recent OFSTED report must be attached to this application.

*NB: Confirmation of an enhanced DBS will be required by the provider (University of Worcester) prior to commencing the Assessment Only route in order to satisfy DFE requirements** The school has confirmed that a prohibition list check has been carried out.
* The school has confirmed that applicants from overseas have been subject to criminal record checks.
* References from previous employer(s) have been obtained to verify that the applicant is suitable for a teaching post.
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| Name (Headteacher): Click or tap here to enter text.Date: Click or tap here to enter text. |