



# Chatsworth International School

**East Campus**

25 Jalan Tembusu, Singapore 438234  
Tel: (65) 6344 - 5955 Fax: (65) 6346 - 5565

**Orchard Campus**

37 Emerald Hill Road, Singapore, 229313  
Tel: (65) 6737 - 5955 Fax: (65) 6737 - 5655



## Application for a Teaching/Teaching Assistant Position

(This form is required for all applicants and should be submitted with all other necessary documentation)

A. Please respond to all fields. Respond with NA if the field is Not Applicable.

Applying for:	Full Time Position	Part Time Position	**Relief Position
Campus Applying for:	Orchard Campus:		East Campus:

(\*\* Relief Teachers must have a valid Dependent's Pass or be a Singapore PR\*\*)

### B. Personal Information

Name: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_ Tel: \_\_\_\_\_

Present Address (if different from above): \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_ Tel: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Date of Birth (dd/mm/yyyy) \_\_\_\_\_

Nationality: \_\_\_\_\_ Passport No. \_\_\_\_\_

Expiration Date (dd/mm/yyyy) \_\_\_\_\_ Marital Status: \_\_\_\_\_

Number of Dependents residing with you: \_\_\_\_\_

Country/State/Province where Teacher Certification was received: \_\_\_\_\_

Date of Certification (dd/mm/yyyy): \_\_\_\_\_ Expiration Date (dd/mm/yyyy): \_\_\_\_\_

Number of Years Full-Time Teaching Experience: \_\_\_\_\_ Administrative Experience: \_\_\_\_\_

Do you hold a Work Visa in another country? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes: Country/State/Province of issue: \_\_\_\_\_

Length of Visa: \_\_\_\_\_ (year) \_\_\_\_\_ (month)

### C. Assignment Preference(s) (more than one can be selected)

Kindergarten:	Primary (Y1-Y3):	Primary (Y4-Y6):
Lower Secondary (Y7-Y9):	High School (Y10-Y11):	High School (Y12-Y13):





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Have you ever been convicted of a crime in your home country or abroad? Yes:      No:

If 'Yes', explain: \_\_\_\_\_

Have you ever been fired from a teaching position? Yes:      No:

If 'Yes', explain: \_\_\_\_\_

Have you ever Broken a Contract? Yes:      No:

If 'Yes', explain: \_\_\_\_\_

Upon submitting this application for employment, the applicant authorizes Chatsworth International School to conduct background and reference checks as deemed necessary and appropriate by the school.

Please list the names, telephone numbers, emails and addresses of at least 3 persons who can give us information about your teaching experience and character. One of these should be your current Principal or Supervisor.

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

### G. Extra Curricular Activities

Please list extra curricular activities you would like to be involved in:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### H. Health Disclosure

Do you have any major illness which might impact on your ability to fulfill your contract?

Yes:      No:

If 'Yes', please describe your medical condition:

\_\_\_\_\_

\_\_\_\_\_



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Please indicate if you are currently undergoing any medical treatment/medication and whether follow-up/continuation is required while employed by Chatsworth International School:

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### I. Emergency Contact Information

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Tel: \_\_\_\_\_ Mobile/Handphone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date (dd/mm/yyyy): \_\_\_\_\_

This application should be forwarded along with your CV and all other required documentation. Please be sure to read the information required for all applicants on our school website before submitting.