



GOVERNMENT OF BERMUDA
Ministry of Education

Department of Education—Human Resource Section

**APPLICATION FOR DEPUTY PRINCIPAL
Dame Marjorie Bean Hope Academy**

Employee #: _____
(Please refer to your pay stub)

Full Name: Dr. _____
Mr. _____
Mrs. _____
Miss _____
Ms _____

Email: _____

Home Address: _____

Telephone Nos.: Home: _____ Cell: _____

Are you Bermudian? YES NO

Are you a non-Bermudian married to a Bermudian? YES NO

If "NO", (please state nationality): _____

QUALIFICATIONS:
(Academic, Professional, Technical)

University/College	Degree(s)/Certificates	Date Obtained

Special Courses Attended Relative to the post you are applying for:

Type of Course	Date	Result	Organizing Authority	Length of Course

EXPERIENCE:

Date of first appointment in the Bermuda Public School system: _____

Completed years of teaching service in the Bermuda Public School system: _____

Present school: _____

Teaching subjects: _____

Name of School	Posts of Responsibility Held	Dates Held

Other teaching experience: _____

Other relevant experience: _____

Relevant Professional Membership(s): _____

Special Skills and Interests: _____

Please provide the names and contact numbers of two professional referees, one of whom must be your present principal. Such referees may not be relatives.

_____	_____
_____	_____
_____	_____

I certify that, to the best of my knowledge, the information contained in this application is a true and factual record, and I understand that should the information provided prove to be incorrect or misleading, then the appointment, either offered or in effect, may be cancelled.

Signature: _____ **Date:** _____

Attachments as requested in the Circular:

- A letter of application
- Current resume
- Most recent evaluation

Documents requested to be brought to the interview as outlined in the Circular:

- Completed pre-interview questionnaire form