TSE TEACHING INTERNSHIP APPLICATION FORM



Personal Information	
Title	
Forename	
Surname	
Address	
Gender	
Date of Birth	
University if applicable and subject	
Home Number	
Mobile Number	
Email Contact	
Disability/Special Needs	

Qualification	ons – where ap _l	olicable			
First degre	e or equivalent				
Date	Date	Name of	Institution	Title of Degree	Class of degree
Started	Completed				
A Levels or	[.] equivalent				
Date	Qualification	Body	Exam	Subject	Grade
	Туре				

GCSE or equivalent: must include Maths and English Language (and Science for Primary) at grade C (new grade 4) or above	
Subject	Grade

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EXPERIENCE:

Please tell us about any experience you have had working with young people

Teaching Experience 1			
From Month/year	To Month/year	Location	Role / Title
Please outline your key responsibilities and reflections on your experience (in bullet form)	•		

Teaching Experience 2			
From Month/year	To Month/year	Location	Role / Title
Please outline your key responsibilities and reflections on your experience (in bullet form)	•		



Please provide any additional information that you feel will support your application for the programme.

This may include:

- Any extra-curricular activities that you have led/ been involved in
- Any positions of responsibility that you have held
- Other examples of how you have engaged with teaching and young people
- Other experiences you have had which you feel are relevant to this programme

EMERGENCY CONTACTS

Please provide contact details below for your next of kin (i.e. who we should contact in the event of an emergency):

Name of next of kin:	
Relationship to Intern:	
Emergency contact telephone number(s):	

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REFERENCES

Please complete the table below with contact details for two referees (we suggest a personal and an academic / professional referee).

Referee 1	
Name of referee:	
Relationship to you:	
Referee's Email:	
Referee's Tel:	
Referee's Address:	
Referee 2	
Name of referee:	
Relationship to you:	
Referee's Email:	
Referee's Tel:	
Referee's Tel: Referee's Address:	

Signed (Candidate):

Date: