

Assessment Only Route for Qualified Teacher Status (QTS)



PLEASE NOTE, WE ONLY OFFER PRIMARY QTS

Part A: The applicant's eligibility (to be completed by the applicant)

Please enclose a photocopy of birth certificate or relevant page in passport.

A1 Personal details		
Title (PLEASE TICK APPROPRIATE BOX) Dr <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>	Surname / Family name (BLOCK CAPITALS)	
First name (s)	Previous surname / Family name, if changed	
Correspondence address		
Postcode		
How long have you lived at that address?		
Previous addresses for the past five years (at the point of application)	Dates	
	From <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> to <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
	From <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> to <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
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	From <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> to <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Daytime telephone number	Evening telephone number	Mobile telephone number
Email Address:		
Gender: Male (M) Female (F) other (O) <input type="checkbox"/>	Date of birth <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
National Insurance No. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	DBS Number: Date of issue:	

A2 Details of course to which you wish to apply

Assessment-Only Route to QTS
 Please note, we only offer Primary QTS Primary 3-7 5-11

A3 Disabilities and Special needs

Please enter appropriate code here: <input type="checkbox"/>	Disabilities/support required: 0 You do not have a disability nor are you aware of any additional support requirements in study or accommodation. 2 You are blind/are partially sighted. 3 You are deaf/have a hearing impairment.	Support required:
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	4 You are a wheelchair user/have mobility difficulties. 5 Personal care support 6 You have mental health difficulties. 7 You have an unseen disability, e.g. diabetes, epilepsy, asthma. 8 Multiple disabilities 10 You have Autistic Spectrum Disorder 11 You have a specific learning difficulty e.g. dyslexia 96 A disability not listed above 97 Information refused 98 Information not sought 99 Not known	
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A4 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.

Please circle appropriate number:

White	Black or Black British	Asian or Asian British	Mixed
White 10	Black Caribbean 21	Indian 31	White and Black Caribbean 41
Irish Traveller 14	Black African 22	Pakistani 32	White and Black African 42
Information refused 98	Other Black background 29	Bangladeshi 33	White and Asian 43
		Chinese 34	Other mixed background 49
		Other Asian 39	Other ethnic background 80

The applicant's education and qualifications

A5 Last two educational establishments at which you studied

Name and address of establishment	From	To	Full time or part time

Copies of all certificates and NARIC certification of equivalency need to be attached to this form.

A6: GCSEs or equivalent qualifications

Please give details of GCSEs or equivalent qualifications and when they were obtained. All applicants must have attained the standard required for GCSE grade C in English Language and Mathematics (and also in Science for Primary applications). The qualification type must be entered along with the grade obtained. Failure to do so may cause a delay in the application being processed. **Please attach copies of your certificates to this application form and be aware that you will also be required to bring original certificates to the 1st stage interview.**

Qualifications other than a UK GCSE will be checked by 2Schools Consortium using NARIC equivalency.

Subject	Qualification and awarding body or details of alternative test or assessment	Grade	Date of award or assessment				
			m	m	y	y	
English Language							
Mathematics							
Science (Primary only)							

A7: Other GCSE and A level or equivalent qualifications

Subject	Qualification and Awarding body or other form of assessment	Grade	Date of award				
			m	m	y	y	

A11: Candidate's teaching experience

Please give details of previous employment as a teacher, qualified or unqualified, in the UK or elsewhere. Applicants applying for the Assessment Only Route must have at least two years full-time teaching experience or the part-time equivalent. Please copy this section if you need to cover experience in more than four institutions.

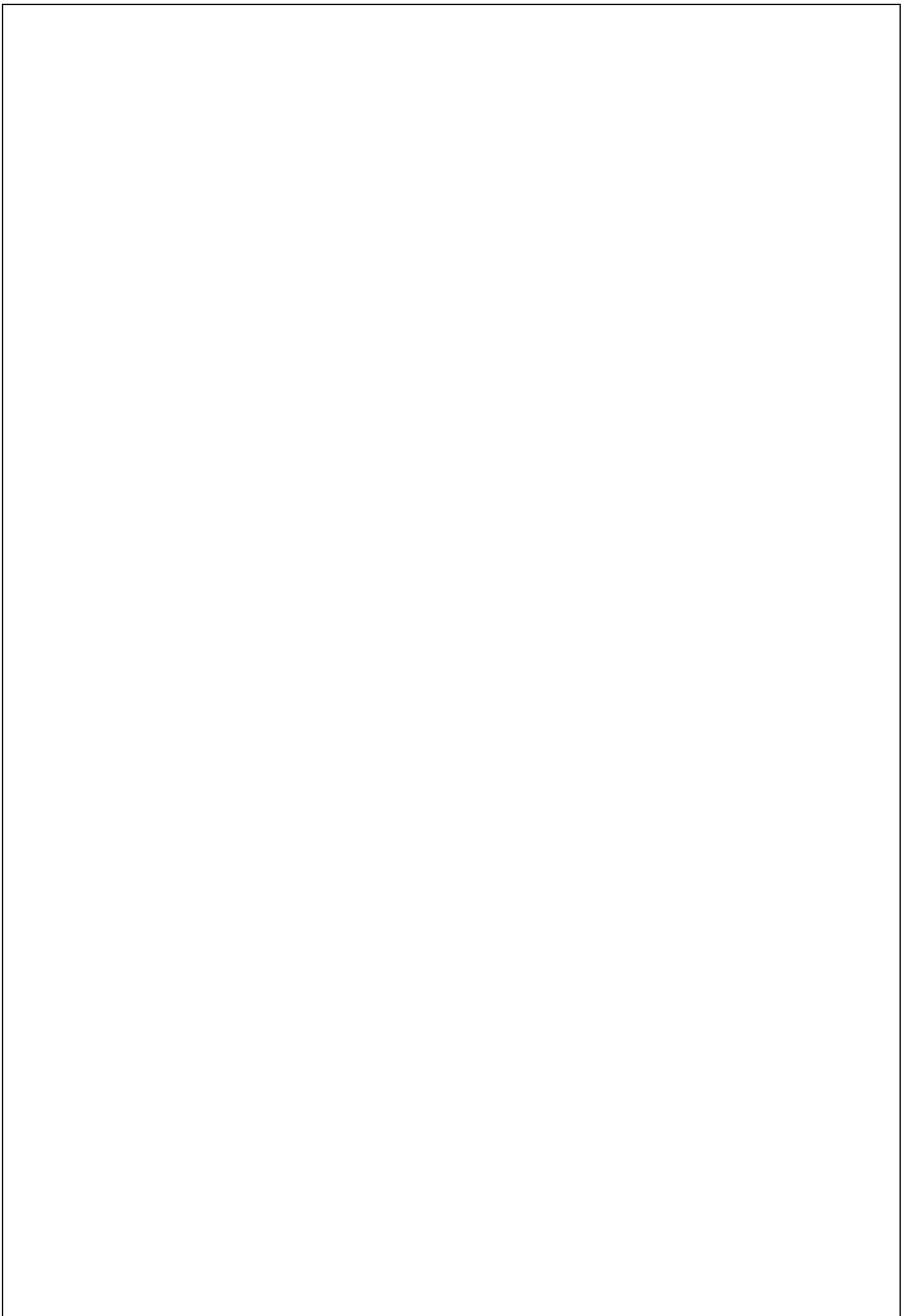
School/college							
Country				Post held			
Dates of service							
From		To					
Please tick box(es) that best describe the school							
<input type="checkbox"/> Primary							
<input type="checkbox"/> Middle		<input type="checkbox"/> Secondary			<input type="checkbox"/> Academy		
<input type="checkbox"/> Further Education		<input type="checkbox"/> Specialist school			<input type="checkbox"/> Independent		
<input type="checkbox"/> Special		Other (please specify)					
Key Stage	Year	No. of pupils	Specify setting	Subject(s) taught	Hrs per wk	Links to National Curriculum/Exam Specifications	Responsible for whole class?

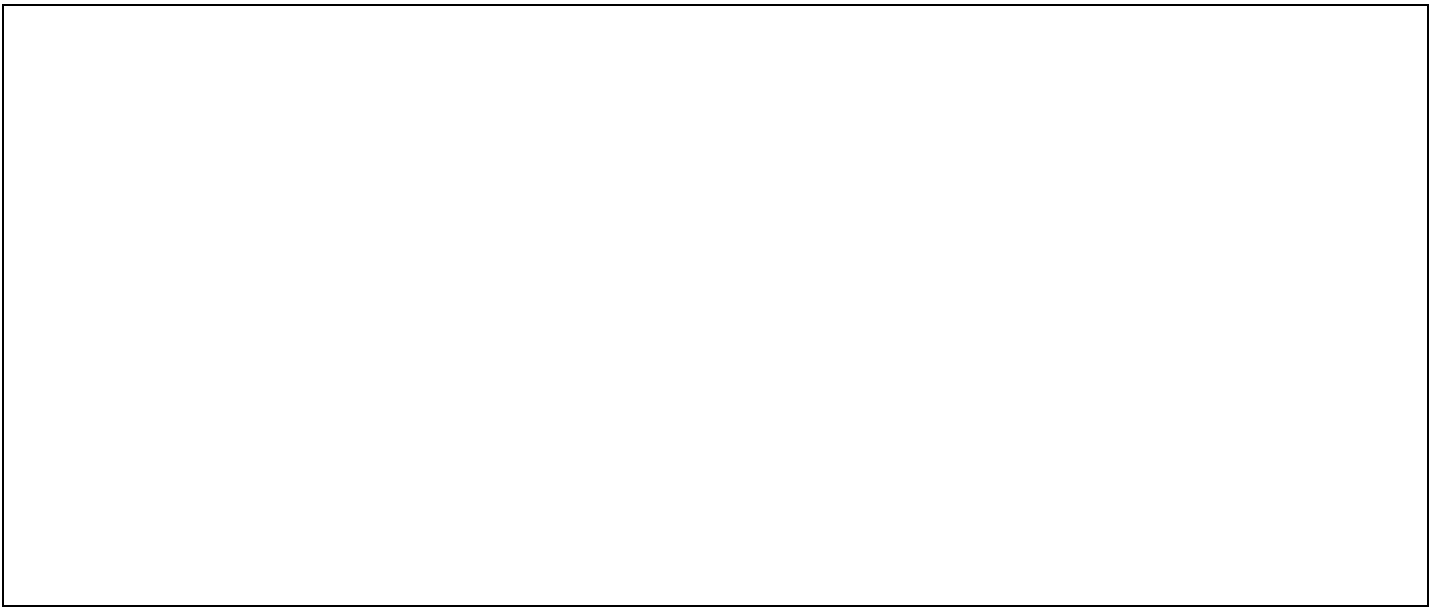
School/college							
Country				Post held			
Dates of service							
From		To					

A12: Personal Statement

Provide an explanation of why you believe the AO is appropriate to you and your circumstances.
Elaborate on the nature of any extended teaching experience.
Explain the support you have for a school placement

Why should 2Schools select you for a place on the Assessment-Only Route? Please link to Teachers' Standards to ensure that you are already meeting all the Teachers' Standards.





A13: References

Please provide the contact details of two referees, one of whom should be your current school Head Teacher or college principal. (see Part C for reference form and further advice in notes for guidance)

Section A13 -References

Your referees should know you well enough to write about you in a teaching context and your suitability for this Programme. The referees should not be a family member, other relatives or friends. 2Schools will contact the second referee directly should a further reference be required.

Part B

Note this section of the Form should be completed with the support of senior staff in the school where the assessment will take place.

B1: A second school experience may be necessary if the applicant's teaching experience to date has been in just one school.

B2: The assessment programme can begin at any point in an academic year provided a significant time with classes in at least two key stages can be guaranteed for assessment purposes.

B3: The focus for teaching would normally be on a particular class

B3: It is important to have one teacher who takes responsibility for any guidance leading to a final assessment of competence against QTS standards using a Portfolio of evidence. Records of progress during an extended teaching experience will be needed and liaison with 2Schools staff will need co-ordination.

Referees' names and addresses			
Name		Name	
Job Title		Job Title	
Relationship to you		Relationship to you	
Address		Address	
Postcode	Telephone number	Postcode	Telephone number
E-mail address		E-mail address	

Normal practice is to take up reference prior to interview.

Part B: The school's support

(to be completed by the applicant with the school in which assessment is to take place)

B1: Information about the school(s) where the applicant will work

Please give the name of the leading school for assessment, and then the names of any other schools where the applicant may work as part of the Route. Give the name of the local authority (LA) area where schools are located even if they are not LA-maintained.

Name and address of leading school where trainee	
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will work											Postcode		
Town or city													
Contact name													
Telephone					Fax					Email			
DfES number				/							LA		
Will the school be the employer?											YES []	NO []	
Is the school in an OFSTED category? Please send a copy of most recent OFSTED report with application.				Special measures? YES / NO				Notice to improve? YES / NO					
Number on roll				Age range				Forms of entry					
Please tick box(es) that best describe the school													
<input type="checkbox"/> Primary				<input type="checkbox"/> Secondary				<input type="checkbox"/> Academy					
<input type="checkbox"/> Middle				<input type="checkbox"/> Specialist school				<input type="checkbox"/> Independent					
<input type="checkbox"/> Further Education				Other (please specify)									
<input type="checkbox"/> Special													
If Specialist, state subject:													

Leading school's experience of Initial Teacher Education

Does the school have experience of other employment-based routes to QTS (ie. the GTP or Teach First)?	YES	NO	If YES, please give the relevant details
Does the school have recent experience with ITT trainees in the applicant's subject or phase?	YES	NO	If YES, please give details of the dates and the name(s) of the accredited provider(s)
Does the school have other staff trained as school-based mentors?	YES	NO	If YES, please give names and positions of staff
Name and address of second school where applicant will work			
Town or city	Postcode		
Contact name			
Telephone	Fax		Email

B2: Dates of the assessment programme

All applicants must spend at least a term (approx 12 weeks) in school before their final QTS assessment. The QTS Standards require all applicants to **teach across two consecutive age ranges to qualify**. They must meet the Knowledge and Understanding requirements for the appropriate age ranges when they are assessed against the QTS Standards

Age range of pupils:	3-7 []	5-11 []															
Proposed dates for Assessment period:	from		to														
	d	d	/	m	m	/	y	y		d	d	/	m	m	/	y	y
			/			/						/			/		
If part-time, number of days a week (full-time equivalent) to be spent working towards QTS:																	

B3: Subjects and key stages the applicant will teach

Key Stage	Year	No. of pupils	Specify setting	Subject(s) to be taught	Hrs per wk	Links to National Curriculum/Exam Specifications	Responsible for whole class?

B4: Monitoring the Applicant's progress

Who will have overall responsibility for monitoring the applicant's progress?

Please note that Assessment Only mentors are expected to:

- Have QTS
- Observe Assessment Only teachers nine times over the assessment period and give them feedback.
- Meet with Assessment Only teachers on a weekly basis to review progress against areas for development outlined in the assessment action plan and to set targets for the following week.
- Help Assessment Only teachers access professional development opportunities (as appropriate).

Name	Position
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Email contact	
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Please outline this person's experience of mentoring adults

How will the applicant's progress be monitored?

**Assessment Only Route (AO)
Headteacher Reference**

Name of applicant:

Name of Referee	
School/College	
Address	
Tel:	E-mail:

Should this reference be treated as confidential? If confidential, please return direct to training@oakthorpe.enfield.sch.uk or Training Office, Oakthorpe Primary School, Tile Kiln Lane, London, N13 6BY

1 - Please comment on the applicant's readiness to complete QTS by an Assessment Only Route.

2 – Please indicate whether the school will be funding the Assessment Only Route or whether the Assessment Only Teacher will be responsible for the fees.	School	[]
	Candidate	[]
Signature	Date	

Please note that you can apply without a second school reference.

We strongly advise you to contact us before you get a second school reference as the nature of your second school experience needs to meet our entry requirements. This can be discussed before you apply or at interview stage 1.

Assessment Only Route (AO) Head Teacher Reference for 2nd School Experience

Name of applicant:

Name of Referee

School/College

Address

Tel:

E-mail:

Should this reference be treated as confidential? If confidential, please return direct to training@oakthorpe.enfield.sch.uk or Training Office, Oakthorpe Primary School, Tile Kiln Lane, London, N13 6BY

Please confirm that the AOR candidate has had full responsibility for planning, teaching and assessing whole classes within their specialist age ranges (3-7, 5-11):

Please confirm how many days completed at 2nd School.

Signature

Date

Part D: Declarations (D1 Applicant, D2 School, D3 Provider)

Please check that all the declarations below are signed and dated. 2Schools Consortium will not be able to process the application unless this section is completed.

Part D - Declarations

When you sign the form, you agree to the following conditions:

- (a) The information you have given is complete and accurate. If we believe that you or your referee have left out any information or given false or misleading information we may take any necessary steps to check whether it is accurate or complete which may result in your application being rejected. If you have any reason to believe that information we have about you is not accurate or complete, you must tell us.
- (b) 2Schools may, at any time, ask you, your referee or your employer to provide more information about your application (eg proof of identify or qualifications). If we do not receive that information by a set date, or if the information is not satisfactory, we may cancel your application.
- (d) If you accept an offer of a place you agree to abide by the rules and regulations of 2schools Consortium as outlined in the Partnership Agreement.

D1: The Applicant

- a) I confirm that the information about my qualifications and experience in this form is true, complete and accurate and no information requested or other material information has been omitted. I have read the Notes of Guidance and I understand what they say and I agree to abide by the conditions there. I acknowledge that the information on this form will be used in accordance with the Data Protection Act 1998 and I give my consent to the processing of data by the provider. If I do not fully comply with these requirements, the provider shall have the right to cancel my application and I shall have no claim against the provider in relation thereto.
- b) I agree to prepare myself for assessment as agreed and present myself for assessment at the agreed time.
- c) I agree that the information in this application and any agreed assessment plan may be stored on a database and made available to a NCTL approved external assessor, or accredited-provider assessor as appropriate to enable them to assess me against the Standards for the Award of QTS
- d) I agree that the information in this application and any agreed assessment plan may be made available to Ofsted to enable them to carry out their quality assurance role in teacher training.

e) I do not already have Qualified Teacher Status.

Signed

Date / /

D2: The School

The school that will assess the applicant should complete this section.

I confirm on behalf of: (school name)

that: (applicant name)

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: An enhanced DBS will be required by the provider (UW) prior to commencing the AO route in order to satisfy NCTL 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.

Signed (Headteacher)

Date / /

Print name and title

D3: Provider

On behalf of 2Schools, I declare that:

- this organisation has checked the certificates and other relevant qualifications documents, and can confirm that the applicant meets the entry requirements for the programme applied for;
- the applicant is, in the opinion of this organisation, a suitable person to be a teacher at the school;
- this organisation will inform the NCTL of any changes to the AO Route;
- the employer has carried out criminal record and health checks;
- the Head Teacher of the school where the applicant will work has confirmed that they support this application and agree to the arrangements set out in this application.
- this organisation undertakes to assess the applicant's suitability for QTS at the end of the assessment period

Signed

Date / /

Print name and title

Position

APPLICATION CHECKLIST

1. Has the applicant completed Part A: The applicant's eligibility? Are copies of all appropriate education certificates attached?	YES	NO
2. If the applicant has previously withdrawn from or failed a QTS assessment, has a letter from the previous ITT provider giving reasons for the withdrawal or failure been included, and has a supporting statement saying why the applicant is now more likely to succeed also been included?	YES	NO
3. Has the school completed Part B: The school's support?	YES	NO
4. Has the school recently carried out an enhanced DBS clearance check and an appropriate medical check for the applicant? <i>NB: An enhanced DBS will be required by the provider prior to the applicant commencing the AO route in order to satisfy NCTL requirements</i>	YES	NO
5. Has the school obtained references from previous employer(s) to verify that the applicant is suitable for a teaching post?	YES	NO
6. Is a reference from the Head Teacher of the supporting school included (Part C)	YES	NO
7. Have all the declarations in Part D been signed and dated?	YES	NO

If you have answered NO to any of the above, please explain why in a covering letter.

The Data Protection Act

When you sign your application form, you consent to the processing of your personal data (as defined by the Data Protection Act 1988) by the provider. You accept that:

- (a) We may keep a copy of your application and use the information to collect statistics or monitor equal opportunities (or both);
- (b) We may use or disclose information on your application for research purposes, but no information that could identify you as an individual will be published.

We will take all reasonable steps to follow the terms of the Data Protection Act 1988.

We confirm that the information provided in your application will normally be confidential between:

- (a) you
- (b) your referees
- (c) the appropriate staff at 2Schools
- (d) your exam board(s) or awarding body

However, we reserve the right to disclose to the police, the Home Office, Local Authorities, examination boards or awarding bodies and the Department for Work and Pensions and its agencies, information from your application to prevent or detect fraud.

We confirm that, in line with the terms of the Data Protection Act, you are entitled to a copy of all your personal data that we hold. We will make a charge for this service to cover administrative costs.

Please return your completed application form to:

training@oakthorpe.enfield.sch.uk