Talentlink Application Questionnaire

Secondary Teacher 2 (Neuinstellinglusion)
Secondary Teacher 2 (Navigate/Inclusion) Do you have the right to work in the UK?
Are you currently registered with or in the process of registering with the GTC(s) to teach in
Scotland?
- Please state below the following information: GTCS Registration number, Full/
Provisional/Pending? Classification/ Registered Subject?
Are you qualified to teach the subject noted on the Job Advert and/or Job profile for this
position?
- Are you applying for this post on a fixed term basis under the probationer flexible route?
How much experience do you have of working in a secondary school?
What experience do you have in delivering Literacy, Numeracy and Health and Wellbeing
outcomes including National Qualifications?
How has the Curriculum for Excellence impacted on your learning and teaching?
What are your approaches to effective learning and teaching, including assessment?
What recent professional development have you participated in to improve the attainment
outcomes for young people with Social, Emotional and Behavioural Difficulties?
Describe where you have had to deal with a challenging young person; how you managed
the situation and what did you do to rebuild your relationship with them.
Please provide any additional information, with particular reference to the Job Profile, which
will support your application.
Additional Information requested
If you have a disability and can offer the skills and experience for the job, we will guarantee
you an interview. Do you wish to declare that you have a disability?
Are you currently employed by Perth and Kinross Council?
- Please insert your Employee Number here:
Have you previously been employed by Perth & Kinross Council or any of its predecessors,
including on a supply basis?
- Please insert your Payroll Number or Job Title, Service/Team/Dates of Employment
here:
Are you related to any member or Senior Officer of Perth and Kinross Council?
- Please state name, position and relationship.

- Please state name, position and relat Are you a member of the PVG scheme?

- Please provide your PVG number, date it was issued and name of the Regulatory Body who countersigned it.

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