

ASSESSMENT ONLY ROUTE to QTS

PART 2: Headteacher's Endorsement of Candidate Application

To be completed by host school and submitted along with Part 1

Name of Applicant	
--------------------------	--

A: School Details

Name of School							
Headteacher							
Address							
School telephone		Head's Email					
Type of school and LA (if relevant)							
Is the applicant currently employed by your school?						<input type="checkbox"/> Yes	<input type="checkbox"/> No
Please specify in what capacity the applicant is/has been teaching in your school, with dates							
Subjects taught							
What Age Ranges are covered by the applicant in her/his current teaching?	3-5	5-7	7-9	9-11	11-14	14-16	16-18
What classes has the applicant taught in your school and for how long (timetable loading and whole class groups)?							

B: Information about the school(s) where the applicant will teach

Main school where trainee will teach during assessment <i>(if different from school at A)</i>			
Will the school be the employer?		YES []	NO []
Is the school in an OFSTED category?	Special measures? YES / NO	Notice to improve? YES / NO	
Name and address of second school where applicant will teach <i>(if applicable)</i>			
Contact name			
Telephone		Email	

C: Age range of pupils to be taught

The AOR criteria require applicants to **teach across an age range to qualify**. They must meet the Knowledge and Understanding requirements for the appropriate age range when assessed against the QTS Standards.

Age range of pupils	11-16 []	14-19 []
----------------------------	-----------	-----------

D: Dates of the assessment programme

All applicants must spend at least a term (approx 12 weeks) teaching in a school where they can progress towards their final QTS assessment.

Proposed dates of assessment:	from	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;">d</td><td style="width: 20px; height: 20px;">d</td><td style="width: 10px; height: 20px;">/</td><td style="width: 20px; height: 20px;">m</td><td style="width: 20px; height: 20px;">m</td><td style="width: 10px; height: 20px;">/</td><td style="width: 20px; height: 20px;">y</td><td style="width: 20px; height: 20px;">y</td></tr> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 10px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 10px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> </table>	d	d	/	m	m	/	y	y									to	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;">d</td><td style="width: 20px; height: 20px;">d</td><td style="width: 10px; height: 20px;">/</td><td style="width: 20px; height: 20px;">m</td><td style="width: 20px; height: 20px;">m</td><td style="width: 10px; height: 20px;">/</td><td style="width: 20px; height: 20px;">y</td><td style="width: 20px; height: 20px;">y</td></tr> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 10px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 10px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> </table>	d	d	/	m	m	/	y	y								
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:																																				

E: Main school's experience of Initial Teacher Education

Does the school have experience of other employment-based routes to QTS (e.g. School Direct Salaried 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 staff trained as school-based mentors?	YES	NO	If YES, please give names and positions of staff

F: Subjects and key stages the applicant will teach

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

G: Monitoring the Applicant's progress

Who will have overall responsibility for monitoring the applicant's progress?			
Name		Position	
Email contact			

Please outline this person's experience of mentoring adults

How will the applicant's progress be monitored?

H: CONFIRMATION OF HEALTH STATUS, ENHANCED DISCLOSURE AND CURRENT VISA STATUS
--

It is the employer's or host school's responsibility to ensure that the candidate has satisfactorily completed the approved health and suitability checks.

N.B. Headteacher to complete and sign the declaration.

Health and fitness to teach check

Date completed: _____

Note: If the applicant has undergone previous medical checks, please can the Head confirm by letter that the applicant is fit and able to teach.

Current Enhanced Disclosure & Barring check

Date of issue: _____

DBS no: _____

Was the check carried out by your school? <i>If No please enter details below</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the applicant been in continuous employment by your school since the DBS check was completed? <i>If No please enter details below</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Identity check and visa status

Expiry date: _____

(Please provide a copy of the applicant's passport and visa)

Signed: _____

Name: _____

Date: _____

J: Head's Recommendation

If you answer No to any of the following questions, please add an explanatory note in the box below

I have conducted a formal interview and I regard (insert name of applicant) as wholly suitable for the Assessment Only Route to QTS	<input type="checkbox"/> Yes	<input type="checkbox"/> No
In my opinion the applicant is physically and mentally fit to teach	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have checked original certificates of qualifications and other relevant documents, and can confirm that the applicant meets the entry requirements for QTS Assessment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
In my opinion the applicant can read effectively and is able to communicate clearly and accurately in Standard English	<input type="checkbox"/> Yes	<input type="checkbox"/> No
In my opinion the applicant possesses the necessary intellectual and academic capacity to meet the QTS Standards	<input type="checkbox"/> Yes	<input type="checkbox"/> No
In my opinion the applicant possesses the appropriate qualities, attitudes and values expected of a teacher	<input type="checkbox"/> Yes	<input type="checkbox"/> No
The applicant has been formally observed successfully teaching whole classes (in a relevant Key Stages) by an appropriately qualified member of my staff	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I confirm that I support this application without reservation	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have read Southfields Academy AO Partnership Agreement and agree to the school's responsibilities in supporting the applicant (if accepted) to achieve QTS as set out in that document	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Additional comments (optional)

Signed (Headteacher)	Date
Print name	