**Inspection Skills Training - Registration Form**

* Please complete the registration form and email it to IST@tribalgroup.com
* The information requested will support your trainer in understanding your background and experience.
* Please ensure payment promptly in order to secure your place on this training.

SECTION 1: Personal and invoicing details

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| **Personal Details** |
| **Title** |  |
| **First names** |  |
| **Family name** |  |
| **Address** |  |
| **Home telephone** |  |
| **Mobile** |  |
| **Email address** |  |
| **Date of birth** |  |
| **Invoicing details (if different from above)** |
| **Name of person / organisation to be invoiced** |  |
| **Email invoice to be sent to** |  |
| **Phone number for invoicing purposes** |  |

SECTION 2: Employment History

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| **Current or most recent employer** |
| **Employer:** |  |
| **Address:** |  |
| **Position held:** |  |
| **Period employed:** |  |
| **Reason for leaving:** |  |
| **Brief description of responsibilities:** |

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| **Previous Employer** |
| **Employer:** |  |
| **Address:** |  |
| **Position held:** |  |
| **Period employed:** |  |
| **Reason for leaving:** |  |
| **Brief description of responsibilities:** |

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| **Other employment** |
| **Employer** | **Job Title** | **Dates Employed** | **Reason for leaving** |
| From | To |
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| **Education History** |  |
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Section 3: Statement of suitability

Please use the space below to complete a statement of suitability and experience. Please include, where applicable, your experience of the following:

* + Inspecting/evaluating/reviewing to a framework/rubric
	+ Monitoring and evaluation in schools, including lesson observation and feedback
	+ Analysis of school/student performance/achievement data
	+ Writing evaluatively