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| Alliance For Learning [CHOSEN] | Bright Futures CMYK 300dpi.jpg |

NQT Registration Form 2019-2020

# School Information

|  |  |
| --- | --- |
| School Name | Click here to enter text. |
| School DfE Reference Number | Click here to enter text. |
| Name of Induction Tutor | Click here to enter text. |
| Email Address | Click here to enter text. |
| Contact Telephone Number | Click here to enter text. |

# NQT Information

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name of NQT | Click here to enter text. | Title | Click here to enter text. |
| Date of Birth |  | DfE Registration Number | Click here to enter text. |
| National Insurance Number | Click here to enter text. |
| Email address | Click here to enter text. |
| Date of award of QTS | Click here to enter a date. | QTS certificate seen by school | (Please tick) [ ]  |
| Date of passing skills tests | English | Click here to enter a date. | Maths | Click here to enter a date. |
| Phase: Primary [ ]  Secondary [ ]  | If secondary – main subject | Click here to enter text. |
| Start date | Click here to enter a date. |
| Appointment: Full-time [ ]  Part-time [ ]  (Please tick) | If part time – %age of week | Click here to enter text. |
| Is this the NQT’s first period of induction? Yes [ ]  No [ ]  (Please tick) |
| If no, please supply details of previous induction periods and highlights number of terms already completed Click here to enter text. |

Please send to Astrid Lavin via alavin@aggs.bfet.uk or by post via

 Altrincham Grammar School for Girls

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 Bowdon

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