

**National Teaching School**  
designated by



National College for  
Teaching & Leadership



**C2C Alliance Limited**  
C/O St Margaret Ward Catholic Academy  
Little Chell Lane,  
Tunstall  
ST6 6LZ  
T: 01782 883047  
E: office@c2cteachingalliance.co.uk

**Notification of Appointment of NQT  
(Registration of NQT with C2C Alliance Limited  
Teaching School Appropriate Body)**

Following an appointment of an NQT please complete and return the form immediately. An NQT must be registered for induction before the induction period can commence. Please complete both sides of the form.

SCHOOL:	DfE NUMBER:	NAME OF SCHOOL CONTACT & EMAIL ADDRESS:	TELEPHONE NUMBER:
<b>NQT Details</b>			
TITLE: (Mr/Mrs/Miss/Ms/Dr)			
FORENAME (S):			
SURNAME:			
DATE OF BIRTH:			
NATIONAL INSURANCE NUMBER:			
TEACHER REFERENCE NUMBER (DfE NUMBER)			
QTS Status checked on DfE employer access database (Please circle)	YES	NO	
<b>NAME OF INITIAL TEACHER TRAINING PROVIDER:</b>			
<b>DATE OF OBTAINING QTS:</b> (This information must be obtained from the DfE employer access database.)	<b>QUALIFICATION</b> (Please tick and state title of course)	PGCE	
		BA with QTS	
		BEd	
		SDTP	
		OTHER	
<b>QTS SKILLS PASSED:</b> (Please ensure that you have seen proof of successful completion of the skills tests)	Please tick for each one		
	LITERACY	NUMERACY	

NAME OF SCHOOL INDUCTION TUTOR					
START DATE (date post commenced)					
YEAR GROUP TAUGHT					
TERMS OF CONTRACT (Please tick)	PERMANENT				
	TEMPORARY (Please specify length of contract)	No OF TERMS IF TEMPORARY (Please tick)			
		I TERM	2 TERMS	3 TERMS	
	FULL-TIME				
	PART-TIME	PROPORTION OF CONTRACT PER WEEK			
<b>Has the NQT completed any period(s) of induction elsewhere before commencing employment with your school? (Please tick and state how many terms)</b> (If yes please forward copies of previous assessment forms to us)		YES		NO	
		If YES, where? _____ _____			
I can confirm that the school is able to provide the statutory support as set out in the DfE regulations effective from September 2014.  Signed: _____  Date: _____					

Please return the completed form immediately following the appointment of the NQT to:

Administrative Officer C2C Teaching Alliance Little Chell Lane Tunstall ST6 6LZ Or email to  office@c2cteachingalliance.co.uk
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**Please note that we can not process this form until we have all the relevant information. Incomplete forms may be returned which may result in delaying registration of your NQT.**