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THE TEACHING COUNCIL OF ZAMBIA
The Teaching Profession Act
 (Act No. 5 of 2013)

Teaching Profession (Registration and Accreditation) Regulations, 2015.
APPLICATION FOR REGISTRATION AS A TEACHER

Please write in BLOCK LETTERS

[Please tick] **Zambian Applicant** **Non-Zambian Applicant**

Class of teacher applied for:

1.	Personal Information	Please complete
	Surname	
	Forename	
	Maiden Name	
	ID/NRC: Number	
	Passport Number	
	TS Number <i>(where applicable)</i>	
	Employee Number <i>(where applicable)</i>	
	Work permit Number <i>(where applicable)</i>	
	Date of birth	
	Student-Teacher Index Number (STIN)	
	Nationality	
	Sex	
	Postal address	
	Fax	
	Mobile Phone Number(s)	
	E- mail Address	
	Marital status	
2.	Residential Address	Please complete
	House Number	
	Street	
	District	
	Province/State	
	Country	
3.	Particulars of next of kin	Please complete
	Name	
	Relationship	
	Postal address	
	Town	
	Phone Number	
	Fax	
	E-mail Address	

ACADEMIC AND PROFESSIONAL DETAILS

Academic Progression

4	<i>Level</i>	<i>Year of Entry</i>	<i>Year of Completion</i>
	Early Childhood Education		
	Primary		
	Junior Secondary		
	Senior Secondary		
	College of Education		
	University College		
	University		
	Other (specify)		

Academic Qualification

5	<i>Category</i>	<i>Qualification/level</i>	<i>Name of Institution</i>	<i>Examining Body</i>	<i>Year obtained</i>	<i>District, Province/State Country</i>
	Primary					
	Secondary					
	College					
	Universities					

Short Courses

8	Qualification	Name of Institution	Period (month/year)		District, Province/State Country
			From	To	

Length of Service as a Teacher

	Number of years	Tick	Public	Private
	0 – 4			
	5 - 8			
	9 -10			
	11 - 14			
	15 and above			

LEVEL OF QUALIFICATION AND FIELD OF SPECIALISATION

9	Highest Qualification (Certificate, Diploma, Bachelor's degree, Masters, Doctorate)	Field of specialisation of training (State your specialisation: e.g. ECE, primary education, secondary subject major and minor, etc.	Trained in Zambia or outside Zambia

EMPLOYMENT STATUS (circle an appropriate response)

Are you currently:	(a) Employed	(b) Unemployed	(c) Retired
Are you working in Zambia?			Yes No
Are you currently working as a teacher?			Yes No
Are you currently working as a teacher-trainer in a college of education?			Yes No
Are you currently working as an administrator in education?			Yes No
Are you a retiree but employed?			Yes No
Are you a retiree but self-employed?			Yes No
Are you self-employed?			Yes No
Are you a proprietor of a school?			Yes No

If your answer to 4.3, 4.4 and 4.5 above is “No”, state your employment status

.....

If you are working, state:

Position / Designation	
Name of Employer (Organisation or Institution)	
Current field of practice	
Postal address	
Town	
Phone Number	
Fax	
E-mail Address	

Current Practising Status (Tick as many as possible)

	Tick	State specific work station (school, district office, etc.)
Full Time		
Part Time		
Secondment		
Fixed Contract		
Attachment		
Other (specify)		

Employment History and Curriculum Vitae

10	Areas where you have worked	Status of institution (Public, private, community, grant-aided, faith-based, etc)	Position Held	Period	
				From	To
	Pre-school				
	Primary School				
	Special Education Primary school				
	Secondary School				
	Special education Secondary School				
	College of education				
	Other Colleges				
	Special Education College				
	University-College				
	University				
	Special Education Assessment and Rehabilitation Centre				
	Counselling Centre				
	Zone Resource Centre				
	District Resource Centre				
	Provincial Resource Centre				
	District Education Office				
	Provincial Education Office				
	School for Continuing Education				
	National Science Centre				
	Examinations Council of Zambia				
	Teaching Council of Zambia				
	Higher Education Authority				
	Zambia Qualifications Authority				
	Curriculum Development Centre				
	Education Broadcasting Service				
	Ministry Headquarters				
	Teacher Unions				
	Others, specify				

Work Experience with institutions (*Tick as many as possible*)

	<i>Category of employment</i>	<i>Tick</i>	<i>Position Held</i>	<i>Duration</i>
	Government			
	Mission			
	Private			
	Defence			
	Non-Governmental Organisation			
	Others			

For International (Non Zambian) Applicants, the Following Must be Submitted:

1. Academic and Professional qualifications
2. Proof of legal entry into the Country
3. Professional reference letter(s) from immediate former supervisor(s)
4. Attach recommendation letter from a recognised institution
5. Application forms must be accompanied by an offer of employment
6. Proof of registration as a teacher from country of origin
7. For applicants from non-English speaking countries, proof of English Language proficiency from a recognised English Language testing centre

DECLARATION

I.....hereby declare that the information given above is true and correct to the best of my knowledge. Should the information be verified to be false, this application shall be rendered invalid.

.....

Signed

Date:

Contact(s) number (Cell).....

Please return the duly completed form including proof of payment of fees to:

The Registrar
 The Teaching Council of Zambia
 P.O. Box 35700
 LUSAKA, ZAMBIA
 Tel. +260 211 240360, 240334

N.B: All foreign qualifications must be verified by the relevant quality assurance bodies before submission.

FOR OFFICIAL USE

Comment by the Teaching Council of Zambia.

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Application granted/rejected

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Signed

Date:

Full name:

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Designation