Teaching Position Application Form

Post or email application to:		Inser	rt physical add	dress and/	or email addı	ress here			
Position applied	for:								
Personal Details									
Surname									
Given names									
Preferred name									
Address									
Contact details	Home				Work				
	Mobile				Email				
		1							
Certificated teac	her status	√	Registration	number				Expiry	date
Certificated									
Provisionally certi	ficated								
Not certificated									
Present teaching	position								
School									
Date appointed									
Type of appointm	ent								
Can we contact t	he principal (of you	r present scho	ol about tl	nis position?	Yes	Ш	No	Ш
Educational Qual	lifications								
Type of qualificat	ion			Received	l from		ı	Date rec	eived

Details of traini Please include o			ory for the l	ast 5 years						
School	Position					Dates	Class level			
Please indicate	any break	s in service a	ınd give rea	sons, e.g. over	seas tro	ıvel:				
Dates	Reason fo	or break								
Total certificate	ed service									
In permanent p		Years:			Months:					
In relieving posit	tions	Years:			Month	nths:				
Professional de Please provide d			rofessionaL	earning and c	develop	ment				
r icase provide (a surminar	y or recent pr	1010331011011	carriing and c	acvelopi	Tioric.				

Confirmation

1	I certify that the information given in this application is, to the best of my knowledge, true and correct. I understand that the claims made in my application may be checked. I understand that if I have supplied incorrect or misleading information, or have omitted any important information, I may be disqualified from appointment, or if appointed, may be dismissed.	Yes	No					
2	I am legally entitled to work in New Zealand in the role applied for (i.e. as a New Zealand or Australian citizen/permanent resident or holder of a current and valid work visa or residence visa).							
3	I am currently registered to teach in New Zealand.	Yes	No					
4	In accordance with the Privacy Act 2020, I authorise the board of trustees to obtain further information from the referees listed in this application, and I consent to the referees disclosing such information to the board	Yes	No					
	STUDENT SAFETY - Cross out the statement that doesn't apply to you.							
	 I have never been the subject of a complaint about the safety of a student. 							
5	I have been the subject of a complaint about the safety of a student. Please give dates and details:							
	OFFENCES AGAINST THE LAW - Cross out the statements that don't apply to yo	u.						
	 I have never been convicted of an offence against the law (excluding mino convictions). 							
	I have no pending charges of an offence against the law.							
6	I have been convicted of an offence against the law. Please give dates and details:							
	I have pending charges of an offence against the law. Please give dates and details:							
7	I know of no reason why I would not be suitable to work with children or young people.	Yes	No					
Applica	ant signature Date							

Referees

Please provide the names and contact details of three referees below. Referee reports are confidential to the board. Referees will only be contacted for candidates who are shortlisted.

Referee 1			
Full name			
Position			
Relationship to applicant			
Contact details	Home	Work	
	Mobile	Email	

Referee 2			
Full name			
Position			
Relationship to applicant			
Contact details	Home	Work	
	Mobile	Email	

Referee 3			
Full name			
Position			
Relationship to applicant			
Contact details	Home	Work	
	Mobile	Email	