

Teaching Position Application Form

Post or email application to: Insert physical address and/or email address here

Position applied for:

Personal Details

Surname				
Given names				
Preferred name				
Address				
Contact details	Home		Work	
	Mobile		Email	

Certificated teacher status	<input checked="" type="checkbox"/>	Registration number	Expiry date
Certificated	<input type="checkbox"/>		
Provisionally certificated	<input type="checkbox"/>		
Not certificated	<input type="checkbox"/>		

Present teaching position

School			
Date appointed			
Type of appointment			
Can we contact the principal of your present school about this position?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>

Educational Qualifications

Type of qualification	Received from	Date received

Details of training and service

Please include details of your work history for the last 5 years

School	Position	Dates	Class level

Please indicate any breaks in service and give reasons, e.g. overseas travel:

Dates	Reason for break

Total certificated service

In permanent positions	Years:		Months:	
In relieving positions	Years:		Months:	

Professional development

Please provide a summary of recent professional learning and development.

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).	Yes	No
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
5	STUDENT SAFETY - Cross out the statement that doesn't apply to you.		
	<ul style="list-style-type: none">I have never been the subject of a complaint about the safety of a student.I have been the subject of a complaint about the safety of a student. Please give dates and details:		
6	OFFENCES AGAINST THE LAW - Cross out the statements that don't apply to you.		
	<ul style="list-style-type: none">I have never been convicted of an offence against the law (excluding minor traffic convictions).I have no pending charges of an offence against the law.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

Applicant 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	