



Murrays Bay Primary School APPLICATION FOR APPOINTMENT

To: The Principal, Murrays Bay Primary School. I wish to apply for the position of:
 at Murrays Bay Primary School
 as advertised in the of

1. Full name:.....
(Surname) *(First Name[s])*
2. Address:

 Phone: Home: Business: Mobile:
 Email:
3. Gender: Male / Female Date of Birth:
4. In order to ensure your safety in our working environment, please supply details of existing medical condition(s):

5. Teacher Registration Number: Expiry date:/...../.....
 Category of registration: Provisional / Subject to Confirmation / Full
6. Qualifications: Please supply a verified copy of all qualifications.

Certificates, degrees and diplomas held	Organisation	Place	Date Conferred

7. Are you currently studying or planning to study for any qualifications? YES / NO

If yes, please give details:

.....

8. In what co-curricular activities are you able to support our learners?

.....

9. What is your current position and the date of your appointment?:.....

.....

10. What was the reason for leaving your last position?

.....

11. Details in date order (most recent first) of previous teaching service. Indicate positions of leadership where applicable:

Position	School	Levels taught	Duties	
			Commenced	Ceased

12. Please state in support of your application any other relevant qualifications, experience or strengths that you feel you possess. (Please use a separate sheet if required.)

.....

13. Names, addresses and phone numbers of three referees: 2 Professional and 1 Character.

1. 2. 3.

- 14. May we discuss references with past or present employers? YES / NO
- 15. May we contact your current or previous employers? YES / NO
- 16. Have you had any court convictions in the last ten years? YES / NO
- 17. Are you currently awaiting the hearing of any charges? YES / NO
- 18. Are there any other disclosures we need to be aware of e.g. disciplinary history relevant to child safety?

YES / NO

- 19. If you are not a New Zealand citizen and if you do not have the right of permanent residency here, then New Zealand Immigration Legislation requires this School to ask the following question:

Do you have a work permit? YES / NO

Expiry Date: _____ / _____ / _____

- 20. If your application is successful, when would you be available to start work?

- 19. Identification – please enclose a verified copy of your driver’s licence and passport as photo identification

Declaration:

I, declare that the answers to the questions in this application are true and correct. I accept that should my application be successful, the foregoing information will form part of my contract of employment and falsification of information may be grounds for dismissal.

Signature: Date:

Information provided on this form is used to assist in appointing the best person. This information will be kept in the personal file (in a locked cabinet) for successful applicants. It will either be returned or destroyed for unsuccessful applicants. The information is accessible to the Principal and the applicant only. It may be updated or amended by the applicant on request.

CONSENT TO DISCLOSURE OF CONVICTIONS

The Murrays Bay Primary School Board of Trustees may forward this to the police for a routine check

The Liaison Officer
Information and Communications Bureau
Police National Headquarters
WELLINGTON

I,
(First names) (Surname/Family name)

.....
(Maiden or any other names used)

Gender: Male / Female Date of birth:

Place of birth:

Nationality:

Address:
.....

hereby consent to the disclosure by the New Zealand Police of any convictions I may have pursuant to this application.

(N.B.: Such a disclosure may NOT include information relating to any discharge under Section 19 of the Criminal Justice Act 1985, or Section 247 of the Crimes Act 1961, or Section 282 of the Children's and Young Persons and their Families Act 1989).

Signed: Date: