

## CONFIDENTIAL

*This information is collected for the purpose of assessing your suitability for employment at Balmoral School. Please complete all sections and sign:*

Preferred Year Level: Specialist/ Music ☐

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### PERSONAL

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**Full Name:** (Surname) \_\_\_\_\_

(First Name) \_\_\_\_\_

(Preferred Name) \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Postal Address:** \_\_\_\_\_

\_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Mobile:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_ **Ext:** \_\_\_\_\_

**Email:** \_\_\_\_\_

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### TEACHER REGISTRATION and CITIZENSHIP

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**TEACHER TRAINING QUALIFICATIONS** (Name of qualification, date of completion and college / university)

\_\_\_\_\_

**I confirm that I hold:**

1. **Current teacher registration:** ☐ Provisional ☐ Subject to Confirmation ☐ Full

**Practising Certificate number:** \_\_\_\_\_ **Expiry date:** \_\_\_\_\_

**CITIZENSHIP**

1.

Are you a New Zealand citizen?

☐ Yes ☐ No
- If no, do you have Permanent Residential Status?

☐ Yes ☐ No

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**EDUCATIONAL QUALIFICATIONS** (name of degree, diploma, etc. Date of completion and University/College)

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**EMPLOYMENT HISTORY**

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**Present or Most Recent Employer**

|                     |             |
|---------------------|-------------|
| Organisation/School | <hr/>       |
| Address             | <hr/>       |
| Position Held       | <hr/>       |
| Main Duties         | <hr/>       |
| Responsibilities    | <hr/> <hr/> |
| Length of Service:  | <hr/>       |
| Reason for Leaving: | <hr/>       |

**Next Most Recent Employer**

|                     |             |
|---------------------|-------------|
| Organisation/School | <hr/>       |
| Address             | <hr/>       |
| Position Held       | <hr/>       |
| Main Duties         | <hr/>       |
| Responsibilities    | <hr/> <hr/> |
| Length of Service:  | <hr/>       |
| Reason for Leaving: | <hr/>       |

**Next Most Recent Employer**

|                     |             |
|---------------------|-------------|
| Organisation/School | <hr/>       |
| Address             | <hr/>       |
| Position Held       | <hr/>       |
| Main Duties         | <hr/>       |
| Responsibilities    | <hr/> <hr/> |
| Length of Service:  | <hr/>       |
| Reason for Leaving: | <hr/>       |

***Please list any other previous employers***

| <b><i>Employer</i></b> | <b><i>Position Held</i></b> | <b><i>Length of Service</i></b> | <b><i>Reason for Leaving</i></b> |
|------------------------|-----------------------------|---------------------------------|----------------------------------|
|                        |                             |                                 |                                  |
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## **CV and REFERENCES**

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A Curriculum Vitae and copies of any references or testimonials you wish to provide in support of this application should be provided.

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## **REFEREES**

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I agree to the referees provided to Balmoral School Board of Trustees, in respect to my application for the position of teacher, being contacted for the purposes of considering my suitability for the position.

I also agree that the board may make further verbal or written enquiry from the referees provided and people associated with my previous employment.

**1.** Name: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Phone Numbers: Work: \_\_\_\_\_ ext. \_\_\_\_\_

Home: \_\_\_\_\_ Mobile: \_\_\_\_\_

Relationship to yourself: \_\_\_\_\_

**2.** Name: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Phone Numbers: Work: \_\_\_\_\_ ext. \_\_\_\_\_

Home: \_\_\_\_\_ Mobile: \_\_\_\_\_

Relationship to yourself: \_\_\_\_\_

**3.** Name: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Phone Numbers: Work: \_\_\_\_\_ ext. \_\_\_\_\_

Home: \_\_\_\_\_ Mobile: \_\_\_\_\_

Relationship to yourself: \_\_\_\_\_

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**CONFIRMATION**

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I ..... (Name) solemnly and sincerely declare that to the best of my knowledge and belief the information given in this application and in my C.V. is correct. I understand that if any false or misleading information is given, or any material information suppressed, I will not be employed, or if I am employed, my employment may be terminated. I understand that this information may be verified.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

## DECLARATION FORM

### Pre-Employment Medical/Safety Checks

#### MEDICAL DECLARATION

Please describe any injury or illness you have had that may affect your ability to effectively carry out the duties and responsibilities of the position?

Do you have any other known condition that may affect your ability to carry out the duties and responsibilities outlined in the Job Description?

☐ Yes ☐ No

If yes, please provide the detail

Do you agree to a medical examination if required?

☐ Yes ☐ No

Have you ever had time off work for a back injury?

☐ Yes ☐ No

If so please detail

Have you ever had time off work for stress?

☐ Yes ☐ No

If so please detail

#### Please Note:

Any false information given in relation to your medical history may result in loss of entitlement for any compensation from ACC or the Board's workplace accident insurer.

## CRIMINAL / SAFETY CHECK DECLARATION

Have you ever been the subject of a complaints procedure during your employment and / or had a mandatory report made to the Education Council?

☐ Yes ☐ No

If you answered 'Yes' please provide the date and details of the complaint, what happened together with any comments you may wish to make

Have you ever been convicted of any offence against the law (apart from minor traffic convictions), or otherwise know of any reason why you should not be employed to work with the Board of Trustees, and/or in the school/education environment?

☐ Yes ☐ No

If you answered 'Yes' please provide the date and details of the offence or other reasons together with any comments you may wish to make

### Please Note:

- a) You may be asked to provide a copy of the relevant Court record(s) obtainable from the Police.
- b) Failure to provide correct and true details of any conviction or reason for possible unsuitability may make you liable to dismissal from the employment of the Balmoral Board of Trustees, should you be the successful applicant.

I,.....declare that to the best of my knowledge the answers in this Declaration Form and the information provided are correct and I understand that if any false or misleading information is given, or any material information suppressed, I will not be employed, or if I am employed, my employment may be terminated.

Signed.....

Date.....