

# Dawson Primary APPLICATION FOR APPOINTMENT



POSITION APPLYING FOR: \_\_\_\_\_

## PERSONAL DETAILS:

Name: \_\_\_\_\_

Mobile Phone: (0 ) \_\_\_\_\_

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

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

NZ Registration No: \_\_\_\_\_

NZ Registration Type: \_\_\_\_\_

Preferred teaching levels: \_\_\_\_\_

Expiry Date: \_\_\_\_\_

## CURRENT EMPLOYER:

Name of present employer/ School: \_\_\_\_\_

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

Position held: \_\_\_\_\_

Phone (0 ) \_\_\_\_\_

Date commenced: \_\_\_\_\_

## REFEREES: (Note: at least one of these should be able to attest to your most recent work performance)

1

Name: \_\_\_\_\_

Position: \_\_\_\_\_

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

Relationship to applicant? \_\_\_\_\_

Mobile Phone: (0 ) \_\_\_\_\_

\_\_\_\_\_

School / Company: \_\_\_\_\_

Years known to applicant \_\_\_\_\_

2

Name: \_\_\_\_\_

Position: \_\_\_\_\_

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

Relationship to applicant? \_\_\_\_\_

Mobile Phone: (0 ) \_\_\_\_\_

\_\_\_\_\_

School / Company: \_\_\_\_\_

Years known to applicant \_\_\_\_\_

3

Name: \_\_\_\_\_

Position: \_\_\_\_\_

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

Relationship to applicant? \_\_\_\_\_

Mobile Phone: (0 ) \_\_\_\_\_

\_\_\_\_\_

School / Company: \_\_\_\_\_

Years known to applicant \_\_\_\_\_

### TERTIARY EDUCATION QUALIFICATIONS

Qualification provider attended	Qualifications attained	Date awarded

*Attach a copy of your relevant qualifications if not included in your CV*

### TEACHING SERVICE (list past 5 schools and positions):

Position	School	Date from	Date to

### PROFESSIONAL ASSOCIATIONS / CONTRIBUTIONS

Please give bullet point details below of how you contribute to your school or other educational associations:

## OTHER INFORMATION

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Are you aware of any injury or medical condition which may cause you to have difficulty effectively carrying out the job position you are applying for?

**If yes, please detail:** \_\_\_\_\_

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Are you a New Zealand citizen?

- If not, do you have residential status?
- If not, do you have a current work permit?

Have you changed your name by deed poll / statutory declaration?

**If yes other names known by:** \_\_\_\_\_

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Have you ever been the subject of any concerns involving child safety?

**If yes, please detail:** \_\_\_\_\_

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Have you had or are you involved in any school discipline issues?

**If yes, please detail:** \_\_\_\_\_

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Do you hold a current practising certificate from the Teaching Council of Aotearoa New Zealand?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

In addition to other information provided, are there any other factors that we should know to assess your suitability for appointment and your ability to do the job?

**If yes, please detail:** \_\_\_\_\_

## Authorisation

Do you agree to inquiries being made as to the accuracy of information contained in this application form, curriculum vitae or attached documents or any other matter relating to your suitability for employment?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Current employer

Past employer / other references

Education Council

**If no, please detail:** \_\_\_\_\_

## DECLARATION:

Yes	No

### HAVE YOU EVER...

Been convicted for an offense against the law?

Received police diversion for an offence?

Been discharged without conviction?

Are you awaiting sentencing or have charges pending?

Been convicted of a driving offense which resulted in temporary or permanent loss of license or imprisonment?

Know of any reason why you should not be employed to work in a school environment?

*(A board may not employ or engage a children's worker who has been convicted of any offence specified in Schedule 2 of the Children's Act 2014. The Clean Slate Act does not apply to schedule 2 offences.)*

**If yes to any of the above, please detail:** \_\_\_\_\_

\_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### I certify that:

- The information I have supplied in this application is true and correct
- I confirm in terms of the Privacy Act 2020 that I have authorised access to referees
- I know of no reason why I would not be suitable to work with children/young people
- 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 liable to be dismissed.

**Signature:**

**Date:**

## PRIVACY ACT 2020 (To be signed by the Applicant)

Consent is given for members of the Dawson Primary School Board, principal or members of the appointment committee to make enquiries of my referees, present or past employers or colleagues or any other person who may assist in establishing my suitability for the position I am applying for at this school including accessing any information used by The Teaching Council of Aotearoa New Zealand.

This Application is submitted with the understanding that any further information given is for the use of the employer and their authorised representatives who may at any time have access to this information.

**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_