

APPLICATION FORM

Please post or email to:

Confidential Application
 Makarewa School
 56 Flora Road East
 RD 6
 Invercargill, 9876
 kevin.silcock@makarewa.school.nz

Position applied for:

**DEPUTY PRINCIPAL
 PERMANENT POSITION – 2MU**

PERSONAL DETAILS

Surname			
Given names			
Preferred name			
Address			
Date of birth			
Contact details	HOME		WORK
	MOBILE		EMAIL

Certificated Teacher Status	<input checked="" type="checkbox"/>	Registration No.	Expiry date
Certificated teacher	<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 your principal about this position? YES NO
 If we need contact your principal we will contact you first.

Educational Qualifications	Type of qualification	Date received	Received from

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.	YES	NO
	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.		
2	I am currently registered to teach in New Zealand.	YES	NO
3	In accordance with the Privacy Act, I authorise the board of trustees to:	YES	NO
	<ul style="list-style-type: none"> Obtain further information from the referees listed in this application, and I consent to the referees disclosing such information to the board 		
	<ul style="list-style-type: none"> Obtain information in relation to my application from persons not listed as referees including your current principal, and I consent to these persons disclosing pertinent information to the board. 		
	<ul style="list-style-type: none"> Contact the Education Council. 		
4	STUDENT SAFETY <i>[Cross out the statement that doesn't apply to you]</i>		
	<ul style="list-style-type: none"> I have never been the subject of a complaint about the safety of a student. 		
	<ul style="list-style-type: none"> I have been the subject of a complaint about the safety of a student. <i>Please give dates and details:</i> 		
5	OFFENCES AGAINST THE LAW <i>[Cross out the statements that don't apply to you]</i>		
	<ul style="list-style-type: none"> I have never been convicted of an offence against the law (excluding minor traffic convictions). 		
	<ul style="list-style-type: none"> I have no pending charges of an offence against the law. 		
	<ul style="list-style-type: none"> I have been convicted of an offence against the law. <i>Please give dates and details:</i> 		
	<ul style="list-style-type: none"> I have pending charges of an offence against the law. <i>Please give dates and details:</i> 		
6	I know of no reason why I would not be suitable to work with children or young people.	TRUE	FALSE

.....
Applicant's signature

.....
Date

PROOF OF IDENTITY

The Vulnerable Children's Act 2015 requires that applicants provide proof of their identity.

Please indicate which form(s) of identification you have provided in your application and, if successful in your application for this position we will take copies of these documents.

NZ Passport: Passport Number: Expires:

NZ Drivers Licence License Number: Expires:

Other form of ID: Expires:

PROOF OF QUALIFICATIONS

Makarewa School requires that you provide proof of your Qualifications.

Please ensure you have included a copy of your highest Qualification when you send your application.

I have included a verified copy of my Qualifications with my application YES / NO

If you answered NO above, please provide a brief reason below:

EEO

Makarewa School is an equal opportunity employer. Please provide answers to the following:

Ethnicity:

Nationality:

Gender: Female / Male

Date of Birth:

Do you live with the effects of injury, long-standing illness, medical condition or disability that may affect your employment or ability to carry out the tasks of a Teacher?

Yes / No

If YES please specify:

REFEREES

Please provide the names and **ALL contact details** of three referees below. Referees' reports are confidential to the board. Referees will only be contacted for candidates who are short-listed.

REFEREE'S DETAILS			
Full name			
Position			
Relationship to the applicant			
Contact details	PRIVATE		WORK
	MOBILE		EMAIL

REFEREE'S DETAILS			
Full name			
Position			
Relationship to the applicant			
Contact details	PRIVATE		WORK
	MOBILE		EMAIL

REFEREE'S DETAILS			
Full name			
Position			
Relationship to the applicant			
Contact details	PRIVATE		WORK
	MOBILE		EMAIL

The position commences at the beginning Term 1, 2022

The deadline for applications is 12 pm. 29 October. No late applications accepted.