



“Na to rourou, na taku rourou, ka ora ai tatou”

Procedure

1. Closing date for applications: **5.00 pm Friday 19 November 2021.**
2. Email jonette@xtra.co.nz the following documents: this completed Application Form, your CV and cover letter along with scanned copies of your certificates. No hard copies are required.
3. Jonette will acknowledge your application via email.
4. Applicants – including shortlisted applicants - will be notified on Saturday 20 November 2021.
5. Interview Day will be **Saturday 27 November 2021.**
6. Applicants will be notified by Sunday 28 November 2021
7. Start date: Term 1, 2022.

Your Curriculum Vitae (CV)

Your CV should contain significant and relevant recent professional development and your past employment.

Privacy

The information you provide on this Application for Employment will be collected and held by the school. It is being collected for the Lake Rotoma School.

If your application is successful, this form will be retained on your personal file. If unsuccessful the documents provided will be destroyed unless you ask otherwise. You have the right of access to personal information and to seek any correction you think necessary to ensure accuracy.

**APPLICATION FORM
LAKE ROTOMA SCHOOL – ACTING PRINCIPAL POSITION U1**

PERSONAL DETAILS

Surname

Given name

Address

Mobile phone

Home phone

Work phone

Email

TEACHER REGISTRATION DETAILS

Teacher registration #

Classification

Date of expiry

CURRENT EMPLOYMENT DETAILS

Name of current school

Address

Year started

Position(s) held

Current salary step
(U grade or number of
units)

PAST EMPLOYMENT DETAILS

Name of school

Position(s) held

Date started/date left

Name of school

Position(s) held

Date started/date left

HEALTH

Do you have, or have you ever had, a medical condition caused by an injury, illness, disability or gradual process that the tasks of the vacancy you are applying for may aggravate or contribute to, or that may affect your ability to carry out the work of the vacancy you are applying for?

No

Yes

DISABILITY

The following is the Recommended International Standard of Disability used by the World Health Organisation (WHO).

“Your activity is limited by a long-term condition or health problem that has lasted six months or more [or is expected to last six months or more].”

Do you consider yourself to be in this category?

No

Yes

EDUCATION

Qualifications Summary

Qualification	Institution	Year of Graduation or % completed
Doctorate (completed)		
Doctorate started		
Masters (with Honours)		
Post Graduate Diploma (gained after Bachelors' degree)		
Bachelors (with Honours)		
Bachelors (other than the one following)		
Bachelors gained from Teacher Training tertiary institution on graduation as a teacher		
Diploma gained from your teacher training at university (usually following your Bachelors)		
Diploma (Undergraduate – earned before you got your Bachelors)		
NZ trained Teachers' Certificate		

CURRENT TERTIARY STUDIES

NOT professional development courses

Qualification	Institution	% completed (estimate)

RECENT PROFESSIONAL DEVELOPMENT AND LEARNING UNDERTAKEN

Course/programme	Provider	Dates

Summarise your experience under the following headings (approx 300 words should be sufficient)

School leadership and management experience

Professional associations (and responsibilities held)

Relevant community involvement

Give **no more** than five reasons why you should be considered for this position.

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REFEREES

REFEREE 1

Name

Postal address

Mobile phone

Home phone

Work phone

Email

Relationship to you

Position held and where

REFEREE 2

Name

Postal address

Mobile phone

Home phone

Work phone

Email

Relationship to you

Position held and where

PERSONAL INFORMATION AND AUTHORISATION

Citizenship and permission to work in New Zealand

	Yes	No	Not applicable
Are you a NZ or Australian citizen?			
If not, do you have a current NZ or Australian permanent residency?			
If not, do you have a current NZ work permit?			
If you have a work permit, please state when it started and when it expires.	From:	To:	

LEGAL CLARIFICATIONS

Board of Trustees may seek a police clearance from all short-listed or preferred applicants prior to confirmation of appointment.

DO read the Declaration at the end of this form before answering these questions.

	Yes	No
Have you ever been declared a bankrupt?		
Are you a discharged bankrupt?		
Have you been convicted of any offence against the law – apart from minor traffic convictions or parking offences?		
Have you been charged with any criminal offence since your teacher registration was renewed?		
Do you have any criminal charges pending?		
Is there any reason why The Education Council of New Zealand might decline to renew your teacher registration when it expires?		
Answer the next questions carefully:	Yes	No
Are your stated qualifications genuine in every respect?		
Have you ever been the subject of any concerns involving student safety?		

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?

(This does not mean that we will make inquiries of any, or all of these people or organisations).

	Yes	No
Current employer?	<input type="checkbox"/>	<input type="checkbox"/>
Past employers?	<input type="checkbox"/>	<input type="checkbox"/>
Other referees?	<input type="checkbox"/>	<input type="checkbox"/>
Former Headmaster/Principal?	<input type="checkbox"/>	<input type="checkbox"/>
The Education Council of New Zealand?	<input type="checkbox"/>	<input type="checkbox"/>
Police?	<input type="checkbox"/>	<input type="checkbox"/>
Signed:	Date:	

Equal Employment Opportunity Statistics (Optional)

Schools in NZ are legally committed to Equal Employment Opportunities (EEO).

To comply with the State Sector Act (1988), schools are required to collect statistical information to monitor EEO. This information is voluntary and is gathered for statistical purposes only. It will **NOT** form part of your application for this position.

Please tick the appropriate boxes below:

Gender:	Male:	Female:
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Ethnicity:	Chose
NZ Maori	<input type="checkbox"/>
NZ European / Pakeha	<input type="checkbox"/>
Pacific Islander	<input type="checkbox"/>
Asian	<input type="checkbox"/>
Other European eg English	<input type="checkbox"/>
Other ethnic origin eg Arabic	<input type="checkbox"/>

DECLARATION

I certify that the information provided in this application is correct and no relevant material/information has been omitted. I understand that this information will be used for the purposes of processing this application and understand that any incorrect or misleading information or important information that has been omitted during the appointment process (including interviews) may disqualify me from consideration, or if appointed, make me liable for dismissal.

Signed:

Date: