

**AURORA COLLEGE
P O Box 740
INVERCARGILL**

APPLICATION FOR EMPLOYMENT

Under the Privacy Act 1993, all information given will be treated as confidential and will only be made available to those involved in the selection and appointment process. You have the right of access to personal information and also to see any correction you think necessary to ensure accuracy.

Unsuccessful applications will have their curriculum vitae returned to them where possible and any others will be destroyed once the appointment process is complete.

For ease of processing and photocopying, please do not send CVs and applications bound or in folders.

Please check that you have supplied the required information and mark the boxes off as you go.

General description of desired position

Learning Area Leader of Te Reo

PERSONAL DETAILS

(please print clearly)

Title (eg Mr, Ms, Mrs, Ms, Dr)

Family Name

First Name(s)

Postal Address

Teacher Reg. No: _____
Fully Reg/Provisionally Reg

Expiry Date:

Other contact details:

(delete as appropriate)

Home telephone number: 1. Leave Message

2. Don't leave message

Business telephone number: 1. Leave Message

2. Don't leave message

Alternative number for messages:

or email address:

CURRICULUM VITAE CHECKLIST

Applicants are asked to complete this Application for Employment form and return it with a covering letter of application and a Curriculum Vitae for each position applied for. Your Curriculum Vitae should contain the following:

- Full employment history (most recent position first)
- Education, training and qualifications relevant to this position.
- Specific skills, strengths and abilities relevant to this position.
- Names and contact details of three recent referees who can substantiate your suitability for this position.
- Any other relevant information and experience.

CITIZENSHIP *(please tick the appropriate box)*

- NZ Citizen Require NZ Work Permit
- Permanent NZ Resident Hold NZ Work Permit

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<p>The information under the heading <i>Health</i> is required to assist the School to meet its obligations under the Health and Safety Act 1992 and the Accident Rehabilitation and Compensation Insurance Act 1992</p> <p>The Acts require that where possible we should reasonably accommodate applicants with such conditions.</p>	<p>HEALTH</p> <p>Have you had an injury or medical condition caused by gradual process, disease or infection – for example, hearing loss, sensitivity to chemicals, repetitive strain injuries – which the tasks of this job may aggravate or contribute to?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please give details and describe any technical aids, equipment or adaptations to the workplace which you would need to make your work easier and/or increase your performance.</p>
<p>The information under the heading <i>Court Convictions</i> is required because some convictions will be unacceptable in some positions.</p> <p>If yes, you may be asked for further details at interview.</p>	<p>COURT CONVICTIONS</p> <p>Have you been convicted of any offence against the law in the last ten years?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Are you awaiting sentencing/currently have charges pending?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>It would be appreciated if you would also complete the attached sheet of EEO statistical information. That page will be detached from your application on receipt.</p>	<p>DECLARATION</p> <p>I declare that to the best of my knowledge, the answers to the questions asked here and all information submitted with my application are correct. I understand that if any false information is given, or any material fact suppressed, I may not be employed, or if I am employed, I may be dismissed. I give consent to the Board or appointed advisor to contact my referees in relation to my application for this position and to make inquiry to previous employers, or other persons, or institutions deemed necessary to satisfy the Board as to the suitability of the applicant for a position at Aurora College.</p> <p>Signature:.....</p> <p>Date:.....</p>

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The information requested on this page is voluntary only.

However, if you would provide this information we would very much appreciate it.

This sheet will be detached from your application prior to the selection process.

This information is used to monitor whether our methods of advertising and supplying information to potential applicants are resulting in a diverse range of applications and whether our appointments are reflecting our aspirations to be an equal opportunity employer.

Many thanks for answering these questions. If you have any comments relating to the EEO issues raised by this part of the application form, we welcome your feedback.

STATISTICAL INFORMATION

1. How did you first find out this position is available?

- Education Gazette
- Someone told me/I knew from my workplace
- Web Site
- Newspaper advertisement – which paper?.....
- Other – please state

2. Ethnicity

- NZ Pakeha/European NZ of Asian descent
- Maori Pacific Nation
- Other, please state

3. Gender

- Male Female/...../.....
day month year

4. Date of Birth

5. Do you have any disability or health related difficulty that has affected your employment or made access to employment or staff development difficult?

- Yes If you have no objection, we would appreciate further details
.....
- No

