

Nelson Tasman Kindergartens

APPLICATION FOR EMPLOYMENT

Important Notes for Applicants

Thank you for applying for a position at Nelson Tasman Kindergartens. Please ensure you have a copy of the position description before completing this application.

1. Please fully complete this form personally. First, read it through, then answer all questions and make sure you sign and date where indicated on the last page.
2. Attach a curriculum vitae (CV).
3. Attach a cover letter that outlines your skills and experience against each of the key tasks of the job description.
4. If successful in your application, you will be required to provide the originals of your qualifications.
5. If you are selected for an interview you may bring whānau/support people at your own expense. Please advise if this is your intention.
6. Failure to complete this application and answer all questions truthfully may result in any offer of employment being withdrawn or appointment being terminated, if any information is later found to be false.
7. All applicants will be required to give consent to a Police vet.
8. a) Applicants may not be employed as a children's worker if they have been convicted of a specified offence listed in [Schedule 2 of the Vulnerable Children Act 2014](#), unless they obtain an exemption. The Criminal Records (Clean Slate) Act 2004 will not apply to these specified offences and these offences will be included in your Police vetting results.
b) The Clean Slate Act allows certain convictions to not have to be disclosed providing:
 - you have not committed any offence within 7 consecutive years of being sentenced for the offence
 - you did not serve a custodial sentence¹ at any time
 - the offence was neither a [specified offence under the Clean Slate Act 2004](#) nor a [specified offence under the Vulnerable Children Act 2014](#)
 - you have paid any fines or costs

Please note that you are not obliged to disclose convictions if you meet the above conditions but can do so if you wish. If you are uncertain as to whether you are eligible contact the Ministry of Justice.

9. Shortlisted applicants being interviewed will need to provide originals of both a primary identity document (e.g. passport) and a secondary identity document (e.g. New Zealand driver license). A list of acceptable primary and secondary documents is available in the last sections of the [Vulnerable Children Regulations 2015](#).
10. This application form and supporting documents will be held by Nelson Tasman Kindergartens in accordance with the provisions of the Privacy Act 1993. If you have any queries, please contact the person cited in the advertisement.

Custodial sentence means a sentence of imprisonment and includes corrective training, preventive detention, a sentence of imprisonment served by home detention, borstal training, detention centre training and any other sentence that requires the full-time detention of an individual. **Non-custodial sentence** includes, but is not limited to, a community-based sentence, a sentence of home detention, a sentence of a fine or reparation, a suspended sentence of imprisonment, and a specified order.

APPLICATION FOR EMPLOYMENT

Position applied for	Location	Vacancy/Ref Number <small>(if applicable)</small>
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Tick one

Mr ☐ Mrs ☐ Ms ☐ Miss ☐

Or other preferred title:

Surname/Family name	First names (in full)
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Birth name (if applicable)

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Are you known by any other name(s)? (if yes please provide below) Yes ☐ No ☐

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Full postal address

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Email address

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Contact telephone numbers

Personal:	Business:

Identity Verification, Criminal Record and Right to Work

Please tick the appropriate boxes:

<u>Immigration information</u>		
Are you a New Zealand citizen?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If not, do you have resident status, or	Yes <input type="checkbox"/>	No <input type="checkbox"/>
A current work permit	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever had a criminal conviction? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If "Yes" please detail:		
<i>(We may not employ or engage a children's worker who has been convicted of an offence specified in Schedule 2 of the Vulnerable Children Act 2014. The Clean Slate Act does not apply to schedule 2 offences.)</i>		
Have you ever received a police diversion for an offence? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If "Yes" please detail:		
Have you ever been discharged without conviction for an offence? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If "Yes" please detail:		
Do you have a current New Zealand driver's licence? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Are you awaiting sentencing or do you have charges pending? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If "Yes" please state the nature of the conviction/cases pending:		
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? E.g. investigations or other matters that may be disclosed in the safety checking process? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If "Yes", please detail:		

<p>Have you ever had complaints about your professional practise and if so, how have you responded to them? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If "Yes", please detail:</p>
<p>Have you ever been the subject of any concerns involving child safety? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If "Yes" please detail:</p>
<p>Do you have any known health condition of any kind, which may affect your ability to effectively carry out the functions and responsibilities of the position applied for? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If "Yes", please detail:</p>
<p>Have you suffered any injury or illness that may affect your ability to effectively carry out the physical requirements, functions and responsibilities of the position applied for (e.g. a previous back injury, carpel tunnel, tennis elbow or other repetitive strain injury)? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If "Yes", please detail:</p>
<p>Are you on any medication which may affect your performance in the position that you have applied for? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If "Yes", please detail:</p>
<p>For teaching positions:</p> <p>Do you hold a current practising certificate from the Education Council of Aotearoa New Zealand? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Which category? (full category one or two / subject to confirmation). Please enter your registration number and expiry date:</p>

Educational Qualifications

	Name	Location	Number of years completed	Highest Qualification Gained
Secondary School				
University				
Other				

Employment History

Please list your work experience for the last five years beginning with your most recent position. Please explain any gaps in employment. If you were self-employed, give details. Attach additional sheets if necessary.

Period worked (please specify the start and end dates) <div> <div>Start date</div> <div>End date</div> </div>			Employer's name (or reason for gap in employment)	Position held	Position Size (please specify for example 0.8 position)	Reason for leaving
	to					
	to					
	to					
	to					
	to					
	to					

Referees

Please provide the names of three people who could act as referees for you. **One of these should be your current employer, we will contact them in consultation with you.** Please indicate which referee is your current/most recent employer in the table below. If you have included written references from people other than those recorded below, please note that we may contact the writers of these references.

Name	Organisation	Position/ Relationship	Landline (preferred)	Mobile

Authority to approach other referees

I authorise Nelson Tasman Kindergartens, or nominated representative, permission to access any information held by the Education Council of Aotearoa New Zealand (EDUCANZ) or any other educational organisation, including information regarding matters under investigation, to gather information related to my suitability for appointment to the position.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Are you a current NZEI Te Riu Roa member?

Yes ☐

No ☐

I certify that:	Tick
• The information I have supplied in this application is true and correct.	<input type="checkbox"/>
• I confirm in terms of the Privacy Act 1993 that I have authorised access to referees.	<input type="checkbox"/>
• I know of no reason why I would not be suitable to work with children/young people.	<input type="checkbox"/>
• 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.	<input type="checkbox"/>

Signature _____

Date