



MARLBOROUGH GIRLS' COLLEGE

Te Kāreti Kōhine o Wairau

APPLICATION FOR EMPLOYMENT

Teaching Staff

CONFIDENTIAL – *to be completed personally by the applicant*

Position applied for: _____

Date of application: _____

PERSONAL DETAILS

First Names in full _____

Surname/Family Name _____

Preferred Name _____

Title Mr Mrs Miss Ms Other _____

Gender Male Female Other _____

Date of Birth (dd/mm/yyyy) _____ MOE Number (if known) _____

TEACHER REGISTRATION DETAILS

Teacher Registration Number _____

Type of Registration Full Provisional STC Other _____

Expiry Date _____

Date application submitted
(if waiting on confirmation only) _____



CONTACT DETAILS

Physical Address _____

Email _____
Home Phone _____ Mobile _____
Work Phone _____
What is the best way/time to contact you?

CURRENT EMPLOYMENT

Present employment _____
Position held _____
School/Organisation _____
Tenure Permanent Fixed Term Relieving

PROOF OF IDENTITY AND RIGHT TO WORK

Are you a New Zealand Citizen: Yes No
If not, do you have a resident status, or Yes No
A current work permit? Yes No
Date of Expiry _____

Shortlisted applicants being interviewed will need to provide originals of two types of identification (one photo ID).

QUALIFICATIONS

Verification of qualifications and teacher's registration will be required - certified copies required.

Certificate, Degrees, Diplomas or other relevant qualifications	Year Passed

TEACHING SUBJECTS

List main teaching subjects, the level to which you are able to teach or have experience in teaching.

Teaching Subjects	Level

EMPLOYMENT HISTORY

Outline your most recent employment history, beginning with current or latest employment.

Period Worked	Employer's Name	Position Held	Reason for Leaving

MEDICAL

Have you had any injury or medical condition caused by gradual process, disease or infection, such as occupational overuse syndrome, stress or repetitive strain injuries, which the tasks of this job may aggravate or contribute to? Yes No

If "Yes", please detail: _____

Do you have any allergic reactions? Yes No

If "Yes", please detail: _____

Do you have any existing medical conditions that the College should be made aware of? Yes No

If "Yes", please detail: _____

The College has a non-smoking policy. Will you have difficulty complying with this? Yes No

GENERAL

Have you ever had a criminal conviction? Yes No

If "Yes", please detail: _____

Have you ever received a police diversion for an offence? Yes No

If "Yes", please detail: _____

Have you been convicted of a driving offence which resulted in temporary or permanent loss of license, or imprisonment? Yes No

If "Yes", please detail: _____

Are you awaiting sentencing/currently have charges pending?

If "Yes" please state the nature of the conviction/cases pending Yes No

Have you ever been the subject of any concerns involving student safety? Yes No

If "Yes", please detail: _____

In addition to other information provided, are there any other factors that we should know to assess your suitability for appointment and ability to do the job? Yes No

If "Yes", please elaborate: _____

REFEREES

Please provide the names of three people who could act as referees for you in a professional capacity. At least two of these should be able to attest to your work performance. **If you have included written references from people other than those recorded below, please note that we may contact the writers of those references.**

Name	Email	Phone (DDI or ext)	Mobile	Position

Declaration One

In accordance with the Privacy Act 1993, I give consent for the Board of Trustees or their representatives to make enquiries from the referees listed in the application and give consent to the referees making such information available. Furthermore, I also give consent for the Board of Trustees or their representatives to make enquiries of past or present employers, colleagues, NZTC or equivalent overseas professional body or any other person who may be in a position to assist the Board in determining my suitability in terms of filling the vacancy and give consent to those people providing such information.

Declaration Two

I declare that to the best of my knowledge, the answers given in this application for employment are correct and I understand that if any omission, false or deliberately misleading information is given, or material fact suppressed, I will not be considered or, that if I am employed, my employment may be terminated.

I also understand that any false information given in relation to my medical history with regards to gradual process, disease or infection, may result in loss of entitlement for any compensation from ACC or the Boards accident insurer.

I certify that:

- The information I have supplied in this application is true and correct
- I confirm in terms of the Privacy Act 1993 that I have authorized 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, or if appointed, I may be disqualified from appointment, may be liable to be dismissed.

By entering your full legal name in the signature box below you agree to the above declarations

Full Name

Signature

Date

Do you consent to MARLBOROUGH GIRLS' COLLEGE retaining the information contained in this application for employment, for the purposes of considering your suitability for any other position, which may arise in the College from time to time? Yes No

PURPOSE

Thank you for applying for a position within our school. The above information is collected for the purpose of assessing your suitability for a position at Marlborough Girls' College, which may include future changes in roles within the school. Please ensure that you have a copy of the job description before completing this application.

1. Please fully complete this form personally. Read it through first then answer all questions and make sure you sign and date where indicated on the last page.
2. Attach Curriculum Vitae containing any additional information. If you include written references, please note we may contact the writers of these references.
3. Please only forward copies of qualifications and certificates. If successful in your application, you will be required to provide originals as proof of qualifications.
4. 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.
5. Applicants invited to interview for this position will have their reasonable travel costs reimbursed. Copies of tax invoice receipts will be required.
6. If you are selected for an interview, you may bring whānau/support people at your own expenses. Please advise if this is your intention.
7. Please note application material will not be returned once the appointment has been made. This application form and supporting documents will be held by the school. You may access it in accordance with the provisions of the Privacy Act 1993.
8. All applicants will be asked to give consent to a police vet (if not already completed as part of teacher registration). It is a requirement in the Education Sector for all employees to be vetted. Please note that under the Vulnerable Children Act 2014, core workers in schools will not be covered by the Clean Slate.

Please note: Electronic applications are preferred. Hard copy applications may be received prior to 12noon on the closing date.