



APPLICATION FOR EMPLOYMENT – QUALIFIED ROLES

Application Information and Guidelines

Congratulations on taking the first steps towards a potential career with Discoveries Educare. The information collected in this form is to assist us with understanding important job-related information.

1. Please complete all sections of the Application for Employment form and it must be filled by the person applying for the job
2. Your Application for Employment form and any other information you provide in support of your application will be treated as confidential
3. If your application is successful, this information will form part of the Discoveries Educare Employment Records and the information contained in this form will be used for work related purposes.
4. Note that Discoveries Educare normally use an e-mail address as a default contact method, so please ensure that the details provided in your application are correct.
5. The completion of this form does not indicate that there is any obligation on the part of the company to engage the applicant.
6. Discoveries Educare may retain the information contained in this application form you're your permission for the purposes of considering your suitability for any other position which may arise with this Company

Vacancy Information

Position Applied for: _____ Location: _____

Date of Application: _____

How did you hear about this vacancy: _____

We have multiple centres across Auckland, would you be prepared to travel to other locations: (tick)

- | | |
|--|-------------------------------------|
| <input type="radio"/> Albany | <input type="radio"/> New Lynn |
| <input type="radio"/> Henderson | <input type="radio"/> New Market |
| <input type="radio"/> Highland Park | <input type="radio"/> Papakura |
| <input type="radio"/> Kelston | <input type="radio"/> Papatoetoe |
| <input type="radio"/> Mangere | <input type="radio"/> Te Atatu |
| <input type="radio"/> Mount Wellington | <input type="radio"/> Wairau Valley |

Have you ever been employed by Discoveries Educare in the Past Yes No

If you have answered yes to the previous question please provide details including dates, and reason for leaving:

If your application is successful when could you commence employment? _____

Personal Information

Family Name: _____ First Name: _____

Middle Name: _____ Preferred Name: _____

Are you known by any other name? Please state: _____

Address: _____

Mobile No: _____ Home phone no: _____

Email Address: _____

Right to Work in New Zealand

Are you a New Zealand Citizen Yes- Go to next section

No -Go to next question

Do you have a permanent residency? Yes

No -Go to next question

What is your Country of Citizenship? _____

Visa Type: _____ Date of Expiry: _____

Registration

Do you have NZ Teacher registration? Yes No

If yes, please provide your registration number: _____

Type: Full Provisional Expiry: _____

The education sector your registration is for? ECE / Primary / Secondary/Other

Are there any conditions (either previous or current) placed upon you by the education council?

Yes No

If yes give details:

Qualification

Provide full details of the qualifications you hold that are relevant to the position applied for.

ECE Qualification's	Year completed	Training provider	Location

Do you hold a current first aid certificate? Yes / No Expiry _____

Do you have a current driver's license? Yes/No

If yes, what class? _____ License number: _____

Employment History

Please ensure a minimum **5 years of employment/occupation history** is listed. If at any stage you were unemployed during this time then please mention the details:

Start date	Finish date	Employer	Location	Position held	Reason for leaving

Referees

Give names and contact details of at least two referees. (Former Employer/Manager/Colleague)

Please note, this cannot be a friend or someone who has known for you for less than 6 months.

Name	Position	Organization	Phone number

Criminal Conviction

Have you ever been convicted of a criminal offence or do you know of any reason why the police might consider you a risk to children or as an employee?

Yes No

Have you been the subject of a Diversion ordered by the Courts?

Yes No

Are you awaiting the hearing of charge in a civil or criminal court of law?

Yes No

Has any previous employer taken disciplinary action regarding you?

Yes No

If you have answered yes to the previous question please provide details

Health & Safety

The purpose of gathering the following information is to enable Discoveries Educare to determine whether you have any medical condition, injury, or impairment which may affect your ability to perform the required work. It will also identify any areas where there could be a health and safety risk to yourself or others relating to a condition, previous injury, or impairment.

Have you ever been treated or hospitalized for a mental illness or injury or condition that would have affected your ability to carry out fully the functions and responsibilities of the position applied for?

Yes No

Have you had any condition, problems, injury, illness, disability or condition that would have affected your ability in the past or may affect your ability to carry out fully the functions and responsibilities of the position applied for?

Yes No

Are you on any medication or under medical treatment or regularly ingest any substances that may affect your ability to carry out fully the functions & responsibilities of the position applied for?

Yes No

Have you ever suffered from a back injury?

Yes No

Have you ever suffered from any injury requiring time off work?

Yes No

Have you ever claimed accident compensation? (ACC)

Yes No

Do you have any physical or other conditions that would make it difficult for you to:

Hear a child cry from 6 metres away? Yes No

Sit on the floor without support? Yes No

Move very quickly? Yes No

Be on your feet for several hours? Yes No

See a child clearly from 6 metres away? Yes No

Pick up a child? Yes No

Pick up toys and equipment from the floor? Yes No

If you answered yes to any of the above questions in this Health section, please provide full details here:

General Information

What transport arrangement do you have to attend your place of employment?

Do you smoke?

Yes No

Do you belong to any union?

Yes No

Application Questionnaire

1. What was your role and duties with your most recent employer?

2. What is your understanding of the role you have applied for?

3. What do you feel will be the greatest challenge for you in this role?

4. What is your understanding of primary caregiving / key teaching?

5. In what ways do you empower children to participate / take ownership of their own learning?

6. What is important for you as a teacher to document in relation to children's learning and development?

7. Dynamics of a team can sometimes become difficult. If you had a disagreement with another team member, how would you deal with it?

8. Are you familiar with the VCA Act 2014 / Child Protection policies?
Explain your understanding in detail.

9. Have you ever been convicted of an offence? If yes, please provide full details and outcome.

10. Have you ever had formal disciplinary actions or complaints against you during employment?
How would you deal with parents if they made a complaint against you?

11. If you discovered two children fighting, what would you do?

12. If you observed 2 children engaged in sexual play, what would you do?

13. How do you feel being left alone in a room with children, and why?

14. Do you have experience in working with staff and children with diverse background? If yes, can you share the details.

15. In what areas would you like to develop your skills?

16. Would you like to share your interests, hobbies?



DECLARATION

I acknowledge that I have read all the instruction information and guidelines.

I understand that the information I have supplied on this application form is to assess my suitability for employment with Discoveries Educare.

If shortlisted, I authorize Discoveries Educare to contact the aforementioned referees to obtain information about me in the form of personal and employment related references. I understand that I will not be provided with any evaluative information given to Discoveries Educare by the listed referees.

I understand that I could be requested to provide consent to pre-employment Health Checks and/or a Drug & Alcohol test as part of the assessment process. I understand that the results of these pre-employment checks may result in Discoveries Educare discontinuing with the selection process.

As part of this application, I understand and agree that a CV accuracy check, qualification check and criminal record check will be completed.

I acknowledge that I have read, understood, and agree to the above conditions.

I declare that to the best of my knowledge, the answers to the questions in this application are true and correct. I understand that if any false information is given, or any material fact suppressed, I may not be accepted for employment, or if I am employed, I may be dismissed without notice.

Name: _____ Signature: _____ Date: _____