



Grovetown School

Vickerman Street, Grovetown, Blenheim
Phone 03 578 6250

He kura e ako taumano ana hei whai painga - A community of lifelong learners who make a difference

APPLICATION FOR APPOINTMENT Year 2 Teacher, Full time, Fixed Term 2019

Important Notes for Applicants

Thank you for applying for a position with our school. Please read the following points:

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 a curriculum vitae (CV) containing additional information. If you include written references please note that we may contact the writers of the references.
3. Please only provide copies of qualification certificates. If successful in your application you may be required to provide originals as proof of qualifications.
4. If you are selected for an interview you may bring whanau/support people at your own expense. Please advise if this is your intention.
5. Failure to complete this application and answer all questions truthfully may result in any offer of employment being withdrawn or appointment being terminated, if any information is later found to be false.
6. All applicants will be asked to give consent to a police vet. It is a requirement in the Education Sector for all employees to be vetted.

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. If you have any queries, please contact the Principal.

APPLICANTS DETAILS

| | | |
|---------|--|--------|
| Name | | |
| Address | | |
| Phone | | Mobile |
| E-mail | | |

PROOF OF IDENTITY AND RIGHT TO WORK CHECK

Shortlisted applicants being interviewed will need to provide originals of 2 types of identification (one photo ID e.g. passport, NZ driver licence and the other a record ID e.g. birth certificate, bank statement, a bill).

| IMMIGRATION INFORMATION | Yes | No |
|---|-----|----|
| Are you a NZ citizen? | | |
| If not, do you have resident status, or | | |
| A current work permit | | |

EDUCATIONAL QUALIFICATIONS

| Name of Educational Centre/ Provider | Location | Number of years completed | Highest Qualification Gained |
|---|----------|------------------------------|---------------------------------|
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EMPLOYMENT HISTORY

Please list your work experience in your last five positions, beginning with your most recent position held. If you have had more than five positions in the last five years, please list them all. Attach additional sheets if necessary.

| Period Worked | Employer's Name | Position Held | Reason for leaving |
|---------------|-----------------|---------------|--------------------|
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CURRICULUM STRENGTHS AND INTERESTS - Please outline your curriculum strengths and interests.

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REFEREES

Please provide the names of two or more people who could act as referees for you. At least one of these should be able to attest to your most recent work performance. 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 | Contact Details (organization and address) | Phone | Relationship |
|------|--|-------|--------------|
| | | | |
| | | | |
| | | | |

| AUTHORITY TO APPROACH OTHER REFEREES | Yes | No |
|---|-----|----|
| I authorize the Board, or nominated representative, to approach persons other than the referees whose names I have supplied, to gather information related to my suitability for appointment to the position. | | |
| I authorize the Board, or nominated representatives, permission to access any information held by the Education Council of Aotearoa New Zealand (EDUCANZ) or any other educational organization, including information regarding matters under investigation, to gather information related to my suitability for the position. | | |

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|--|-----------|
| Is there anything that you know about that could prevent you fulfilling this role now or in the future? (e.g. criminal convictions, health or medical conditions, etc) | |
| Yes | No |
| If yes, please give details. | |

DECLARATION

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.
- 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.

Signature _____

Date _____

Note If completing this electronically a hard copy (signed) must be provided.