



PORANGAHAU SCHOOL

Application Form Principal-Release Teacher 2020

PORANGAHAU SCHOOL DECLARATION

The Board of Trustees has a policy to employ the best available teacher to all teaching and management positions at Porangahau School. All applicants must be registered teachers.

Please complete this declaration form and forward it with your application to: Board Chair, Porangahau School, 58 Keppel St, Porangahau 4291 or email to: office@porangahau.school.nz by the closing date.

NOTE – if you answer YES to any question you must provide further information on a separate sheet.

Have you ever been found guilty of a criminal offence?
(apart from minor traffic convictions) Yes No

If you have answered “yes”, please provide the date and details of the offence, or other reasons together with any comments you wish to make. You may be asked to provide a copy of the relevant Court record(s) obtained from the Registrar of the Court concerned. Please note, failure to provide correct and true details of any conviction or reason for possible unsuitability will make you liable to be dismissed from the employment of the PORANGAHAU School Board of Trustees, should you be the successful applicant.

Have you ever been dismissed from any teaching position? Yes No

Have you ever been refused registration or had registration or classification as a teacher cancelled in any country? Yes No

Are you aware of any circumstances and/or medical condition which the school and/or EDUCANZ should take into consideration in deciding whether you are of good character, and fit to be a teacher? Yes No

1. **STATEMENT OF THE PRIVACY ACT:** In accordance with the provision and regulation of the Privacy Act 1993, I hereby give the Porangahau School Board of Trustees permission to contact my referees and/or the Principal/Fixed-term Acting Principal of schools in which I have taught and/or any other such person or agency, to gain such information as is required for the Porangahau School Board of Trustees to ascertain my suitability for appointment to a position at Porangahau School.

2. **Teacher Registration number:**

Expiry Date:

I solemnly and sincerely declare that to the best of my knowledge and belief the information in this application is true and correct. I confirm in regards the Privacy Act 1993, I have authorised access to referees and others for the purposes of assessing my suitability for this position.

Applicant's signature: _____ **Date:** _____

Failure to 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.

Shortlisted applicants are asked to give consent to a police vet. It is a requirement in the Education Sector for all employees to be police vetted.

This application form and all supporting documents will be held by the school. You may access it in accordance with the provisions of the Privacy Act 1993.

APPLICATION FOR APPOINTMENT

Position applied for:

Location:

Permanent Principal-Release Teacher

Porangahau School

Tick One

Mr

Mrs

Ms

Miss

Or other preferred title:

Surname/Family Name:

First Names (in full):

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Full Postal Address:

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Phone/Email Contacts:

Private:	Mobile:
Work:	E-mail:

Professional Status:

N Z Teacher registration Number :	
Teacher Registration Status:	Expiry date:

Educational Qualifications:

Please state your last secondary level qualification:
Please state your tertiary level qualification/s:

Please state any other qualifications that relate to this position:

Personal Details

Proof of Identity will be required.

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? <i>(Under the Vulnerable Children's Act 2014 core workers in schools will not be covered by the Clean Slate Act 2004 scheme)</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If "Yes" please detail:		
Have you ever received a police diversion for any offence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If "Yes" please detail:		
Have you been convicted of a driving offence which resulted in temporary or permanent loss of licence, or imprisonment?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If "Yes" please detail:		
Are you awaiting sentencing/currently have charges pending?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If "Yes" please state the nature of the conviction/cases pending:		
Have you ever been the subject of any concerns involving student safety?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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?		
If "Yes", please elaborate:		

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 <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"/>

Employment History

Please outline most recent employment history, beginning with current or latest employment.

Period Worked	Employer’s Name	Position Held	Reason for Leaving

Referees

Please provide the names of at least **three** people who could act as referees for you. At least **two** of these referees should be written reports. You can submit more written and verbal referees if you wish.

Name	Address	Contact	Relationship (e.g. employer, Principal/Fixed-term Acting Principal, personal)

Authority to approach other referees: I authorise the Board, or nominated representative, to approach my listed referees and to access the Education Council of NZ (EDUCANZ) records, or any other persons they see fit to gather information related to my suitability for appointment to the position.			Yes <input type="checkbox"/> No <input type="checkbox"/>

Privacy Statement

The information that you supply on this application form is solely to assess your suitability for employment with Porangahau School. This information will be held securely at Porangahau School and under Porangahau School’s rules of access. Information on unsuccessful candidates will be destroyed within three (3) days of the appointment being accepted. If appointed, you have the right to view your personal information held by Porangahau School, and may request correction if necessary.

Signature: _____ Date: _____

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

Please fully complete these forms personally. Read through them first then answer all questions and make sure you sign and date where indicated. There is some repetition of some of the information required depending on its purpose.

Please include a Covering Letter and Curriculum Vitae to support your application by the closing date. You may submit additional referee reports and/or provide names of additional verbal referee contact names.

Copies only of qualification certificates should be attached. If successfully short-listed you will need to provide proof of identification and if successfully appointed you will be required to provide originals as proof of qualifications.