

# Teaching Position Application Form

**Post or email application to:** Insert physical address and/or email address here

**Position applied for:**

## Personal Details

Surname				
Given names				
Preferred name				
Address				
Contact details	Home		Work	
	Mobile		Email	

Certificated teacher status	✓	Registration number	Expiry date
Certificated	<input type="checkbox"/>		
Provisionally certificated	<input type="checkbox"/>		
Not certificated	<input type="checkbox"/>		

## Present teaching position

School			
Date appointed			
Type of appointment			
Can we contact the principal of your present school about this position?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>

## Educational Qualifications

Type of qualification	Received from	Date received

**Details of training and service**

Please include details of your work history for the last 5 years

School	Position	Dates	Class level

Please indicate any breaks in service and give reasons, e.g. overseas travel:

Dates	Reason for break

**Total certificated service**

In permanent positions	Years:		Months:	
In relieving positions	Years:		Months:	

**Professional development**

Please provide a summary of recent professional learning and development.

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## Confirmation

1	I certify that the information given in this application is, to the best of my knowledge, true and correct. I understand that the claims made in my application may be checked. 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 dismissed.	Yes	No
2	I am legally entitled to work in New Zealand in the role applied for (i.e. as a New Zealand or Australian citizen/permanent resident or holder of a current and valid work visa or residence visa).	Yes	No
3	I am currently registered to teach in New Zealand.	Yes	No
4	In accordance with the Privacy Act 2020, I authorise the School Board: to obtain further information from the referees listed in this application, and I consent to the referees disclosing such information to the board	Yes	No
5	Do you have any medical conditions (physical or mental) that may affect your ability to effectively carry out the functions and responsibilities of employment, or which may be aggravated or further contributed by the functions and responsibilities required under this employment role? If Yes please detail:	Yes	No
6	<b>STUDENT SAFETY</b> – Cross out the statement that doesn't apply to you.		
	<ul style="list-style-type: none"> <li data-bbox="226 1415 1505 1464">• I have never been the subject of a complaint about the safety of a student.</li> <li data-bbox="226 1482 1505 1576">• I have been the subject of a complaint about the safety of a student. Please give dates and details:</li> </ul>		
7	<b>OFFENCES AGAINST THE LAW</b> – Cross out the statements that don't apply to you.		
	<ul style="list-style-type: none"> <li data-bbox="226 1751 1505 1827">• I have never been convicted of an offence against the law (excluding minor traffic convictions).</li> </ul>		
	<ul style="list-style-type: none"> <li data-bbox="226 1850 1505 1908">• I have no pending charges of an offence against the law.</li> </ul>		
	<ul style="list-style-type: none"> <li data-bbox="226 1930 1505 2011">• I have been convicted of an offence against the law. Please give dates and details:</li> </ul>		
<ul style="list-style-type: none"> <li data-bbox="226 2033 1505 2114">• I have pending charges of an offence against the law. Please give dates and details:</li> </ul>			

## Referees

Please provide the names and contact details of three referees below. Two should be your current or previous senior manager. Referee reports are confidential to the board.

### Referee 1

Full name				
Position				
Relationship to applicant				
Contact details	Home		Work	
	Mobile		Email	

### Referee 2

Full name				
Position				
Relationship to applicant				
Contact details	Home		Work	
	Mobile		Email	

### Referee 3

Full name				
Position				
Relationship to applicant				
Contact details	Home		Work	
	Mobile		Email	