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| **TEACHER - application form** |
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| ../Desktop/logo_wide_RGB_hires.jpgThank you for applying for a position with our school. Please ensure you complete this form personally. Include this form with your application. ***Please email to:***Tony Grey – Principaltony@teaomarama.school.nz

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| **POSITIONS INTERESTED IN (Please tick/shade all that apply)** |
| Permanent Fulltime |  | Fixed Term for 2025 |  | Fixed term Reliever/ release role for 2025 |  |

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| **personal details** |
| Surname |  |
| Given names |  |
| Preferred name |  |
| Address |  |
|  |
|  |
| Date of birth |  |
| Contact details | home |  | work |  |
|  | mobile |  | email |  |
| Teacher Registration Number*(if certified)* |  |
|  |
| **Present Position** |  |
| School / Organisation |  |
| Date appointed |  |
| Position title |  |
| **Can we contact your current employer about this position?**  | **yes** | **no** |  |
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| **Educational Qualifications** | Type of qualification | Date received | Received from |
|  |  |  |
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| **Work History***Please include details of your work history for the last 10 years.* |
| SCHOOL/business/organisation | position | dates |
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| **confirmation** |
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| **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** |
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| **2** | I am currently registered to teach in New Zealand. | **yes** | **no** |
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| **3** | In accordance with the Privacy Act, I authorise the board of trustees to:* Obtain further information from the referees listed in this application, and I consent to the referees disclosing such information to the board
* Obtain information in relation to my application from persons not listed as referees, and I consent to these persons disclosing pertinent information to the board.
* Contact the Teaching Council.
 | **yes** | **no** |
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| **4** | **student safety [*Cross out the statement that doesn’t apply to you*]*** I have never been the subject of a complaint about the safety of a student.
* I have been the subject of a complaint about the safety of a student.*Please give dates and details:*
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| **5** | **offences against the law [*Cross out the statements that don’t apply to you*]*** I have never been convicted of an offence against the law (excluding minor traffic convictions).
* I have no pending charges of an offence against the law.
* I have been convicted of an offence against the law.*Please give dates and details:*
* I have pending charges of an offence against the law.*Please give dates and details:*
 |
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| **5** | I know of no reason why I would not be suitable to work with children or young people. | **true** | **false** |
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| *Applicant’s signature* |  |  *Date:* |

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| **referees** |

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| Please provide the names and contact details of two referees below. Referees’ reports are confidential to the application panel. Please send [this link](https://docs.google.com/forms/d/e/1FAIpQLSd41x1NaLubv4z0HZMVftBmAAgjLS7bSJHY5xmkk4j_wskO2Q/viewform) to your referees, and have them complete the google form before applications close. |
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| **referee’s details** |
| Full name |  |
| Position |  |
| Relationship to the applicant |  |
| Contact Details  | mobile |  | email |  |
|  |
| **referee’s details** |
| Full name |  |
| Position |  |
| Relationship to the applicant |  |
| Contact Details | mobile |  | email |  |