

Application Form

Position applied for: _____

Personal Details	
Surname	_____
Given names	_____
Preferred name	_____
Address	_____ _____ _____
Contact details:	home: _____ work: _____ mobile _____ email: _____

Registered Teacher Status	✓	Registration No.
Registered teacher	✓	_____
Provisionally registered		_____
Not registered		_____

Present Teaching Position	_____			
School	_____			
Date appointed	_____			
Type of appointment	Permanent	Full time	Part time	Relieving
<i>(please circle)</i>				

1. I certify that the information given in this application is, to the best of my knowledge, correct. I understand that the claims made in my application may be checked.

2. I am currently registered to teach in New Zealand

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 Teachers Council

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 details and dates):

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 details and dates):
 - I have pending charges of an offence against the law. (Please give details):

The information I have supplied in this application is true and correct.

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.

I confirm, in terms of the Privacy Act 1993, that I have authorised access to referees.

I know of no reason why I would not be suitable to work with children or young people

Applicant's Signature: _____

Date : _____



Referees

Please provide the names and contact details of three referees below. Referee's reports are confidential to the board. Referees will only be contacted for candidates who are short-listed.

Referee's Details

Full Name	
Position	
Relationship to the applicant	
Contact Telephone - Work:	
Contact Telephone - Private:	
Contact Telephone - Mobile	
Email:	

Referee's Details

Full Name	
Position	
Relationship to the applicant	
Contact Telephone - Work:	
Contact Telephone - Private:	
Contact Telephone - Mobile	

Referee's Details

Full Name	
Position	
Relationship to the applicant	
Contact Telephone - Work:	
Contact Telephone - Private:	
Contact Telephone - Mobile	
Email:	