



APPLICATION FORM

SCALE A TEACHER – FIXED TERM

PERSONAL DETAILS

Surname			
First Name			
Birth Name (if applicable)			
Are you known by any other name? If so, provide details			
Address			
Contact Details	MOBILE		BUSINESS
	EMAIL		

CERTIFIED TEACHING STATUS

	Registration Number	Expiry Date
Fully Certified		
Provisionally Certified		
Other (provide details)		

PRESENT TEACHING POSITION

School	
Date Appointed	
Type of Appointment	

QUALIFICATIONS

Type of Qualification	Date Attained	Attained From

Summary of Employment

Please summarise your work history for the last 5 years.

EMPLOYER	POSITION HELD	CLASS LEVEL	START/FINISH DATES

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

DATE	REASON FOR BREAK IN SERVICE

DECLARATION AND CONFIRMATION

1	Have you ever been the subject of any concerns involving child safety? If yes, please detail:	YES	NO
2	Have you ever had a criminal conviction? If yes, please detail: <small>(A Board may not employ or engage a children's worker who has been convicted of an offence specified in Schedule 2 of the Children's Act 2014. The Clean Slate Act does not apply to schedule 2 offences).</small>	YES	NO
3	Have you ever received a police diversion for an offence? If yes, please detail:	YES	NO
4	Have you ever been discharged without conviction for an offence? If yes, please detail:	YES	NO

5	Have you ever been convicted of a driving offence which resulted in temporary or permanent loss of licence, or imprisonment? If yes, please detail:	YES	NO
6	Are you awaiting sentencing, or do you have charges pending? If yes, please state the nature of the conviction/charges pending:	YES	NO
7	In addition to other information provided are there any other factors that we should know to assess your suitability for appointment and your ability to do the job? If yes, please detail:	YES	NO
8	Are you aware of any injury or medical condition that could impact your ability to perform this job effectively? If yes, please detail:	YES	NO
9	I give consent to Kerikeri Primary School to conduct an independent police vet.	YES	NO
10	I am currently registered to teach in New Zealand.	YES	NO
11	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 liable to be dismissed.	YES	NO
12	I confirm in terms of the Privacy Act 1993 that I have authorised the Board of Trustees or nominated representative to: <ul style="list-style-type: none"> • 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. • Access any information held by the Education Council of Aotearoa New Zealand (EDUCANZ) or any other education organisation including information regarding matters under investigation, to gather information related to my suitability for appointment to the position. 	YES	NO

Applicant Signature (Print & Sign)

Date

REFEREES

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

REFEREE DETAILS				
Full Name				
Position				
Relationship to the Applicant				
Contact Details	PRIVATE		WORK	
	MOBILE		EMAIL	

REFEREE DETAILS				
Full Name				
Position				
Relationship to the Applicant				
Contact Details	PRIVATE		WORK	
	MOBILE		EMAIL	

REFEREE DETAILS				
Full Name				
Position				
Relationship to the Applicant				
Contact Details	PRIVATE		WORK	
	MOBILE		EMAIL	