**A logo with text and a circle

Description automatically generated with medium confidence**

**Application Form**

Please complete this application form and send together with your CV and Cover Letter to:

Terri Johnstone - [terri@c4change.co.nz](mailto:terri@c4change.co.nz)

**Please note that applications close on Sunday the 11th of August at 5pm**

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| --- | --- |
| Personal Details | |
| Surname: | Forename/s: |
| Address: | |
| Home Phone: | Mobile: |
| Preferred email: | |
| Are you legally entitled to work in New Zealand? Yes / No | |

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| Teaching Details | |
| Registration Number: | Expiry Date: |
| Practising Certificate Number: | MoE Employee #: |

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| Education and Qualifications (Past and Current) | | |
| Degree/Diploma/Certificate | Name and Location of Institution | Year/s |
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| Please attach copies of official transcripts | | |

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| Relevant Professional Development | | |
| Development Undertaken | Name and Location of Institution | Year/s |
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| Current Employment |
| Position/s Held: |
| School/Institution: |
| Location: |
| Period of Employment: |
| Current Teacher Classification/Salary Step: |

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| Employment History | | |
| Name of Employer | Position/s Held | Year/s |
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| Professional Associations |
| Advise the professional associations you belong to and your role in them: |

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| Medical/Health |
| Do you have any injury, illness or condition that may affect your ability to effectively carry out the duties and responsibilities of the position?  Yes / No |
| If you have answered ‘yes’ above, please specify: |

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| Convictions |
| Have you ever been convicted of any criminal offence (other than a minor traffic offence?  Yes / No  If ‘yes’, please enclose a certified copy of the entry in the Criminal Record Book relating to the conviction(s), obtained from the Registrar of the Court concerned. The copy should be accompanied by comments regarding the offence – please give full details: |
| Are you currently awaiting the hearing of any charges?  Yes / No  If ‘yes’, please provide details: |
| Have you been, or are you currently under investigation from any authority such as the Teachers Council, Health and Disability Authority, Privacy Commission etc?  Yes / No  If ‘yes’, please provide details: |
| Note: The School may seek a police clearance from all short-listed applicants or preferred applicants, prior to confirmation of appointment. |

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| Referee Information | |
| Please provide referee information below. At least three of your referees must be known to you in a work-related capacity. Up to three referees may be contacted prior to short listing.  Please note that the Appointment Committee may wish to contact other people who are not on this list – please see the disclaimer. | |
| Referee A | |
| Name: |  |
| Phone: |  |
| Position Held: |  |
| Organisation: |  |
| Relationship to Applicant: |  |
|  |  |
| Referee B | |
| Name: |  |
| Phone: |  |
| Position Held: |  |
| Organisation: |  |
| Relationship to Applicant: |  |

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| --- | --- |
| Referee C | |
| Name: |  |
| Phone: |  |
| Position Held: |  |
| Organisation: |  |
| Relationship to Applicant: |  |
|  |  |
| Referee D | |
| Name: |  |
| Phone: |  |
| Position Held: |  |
| Organisation: |  |
| Relationship to Applicant: |  |
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| Referee E | |
| Name: |  |
| Phone: |  |
| Position Held: |  |
| Organisation: |  |
| Relationship to Applicant: |  |

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| Declaration and Authorisation |
| 1. I declare that the information supplied by me is given voluntarily and is true, accurate and complete in all respects. I acknowledge that I will not hold Reefton Area School responsible for any omission or mis-statements that I have made in the information provided. 2. I understand that all information provided about me to you, including my application form, resume, references and any assessments will be held by Reefton Area School to be used for the purpose of evaluating my qualifications, experience and suitability for employment as Principal of Reefton Area School. 3. I understand that if I withhold relevant information or supply false or misleading information about myself, my application may not be further considered. I also understand that my employment may be terminated if, after investigation, my employer discovers that any information which I have provided is false or misleading. 4. I understand that I am entitled to have access to relevant information retained by Reefton Area School (except for any exemption provided under the Privacy Act 1993 such as evaluative material) and to request correction of the information and/or request that there be attached to the information a statement relating to the fact that I have requested a correction. 5. I consent to the Presiding Member and/or Appointment Committee personnel making such enquiries with such organisations including but not limited to inquiries with all former employers, Teacher Registration Board, and such other bodies or organisations which might hold information relevant to my employment, my suitability to manage and any other information that my prospective employer deems necessary to obtain. 6. The appointment process will be confidential and closed to the appointment committee and referees. There will not be hui with staff or students. |
| Signature: Date: |