



TANGAROA COLLEGE

application for appointment

IMPORTANT NOTES FOR APPLICANTS

Thank you for applying for a position with our school. Please ensure you have a copy of the job description before completing this application.

1. Please fully complete this form personally. Read it through first then answer all questions and make sure you sign and date where indicated on the last page.
2. Attach a curriculum vitae (CV) containing any additional information. If you include written references, please note that we may contact the writers of the references.
3. If you are selected for an interview you may bring whānau/support people at your own expense. Please advise if this is your intention.
4. Failure to complete this application and answer all questions truthfully may result in any offer of employment being withdrawn or appointment being terminated if any information is later found to be false.
5. In terms of a criminal conviction, the Criminal Records (Clean Slate) Act 2004 provides certain convictions do not have to be disclosed providing:
 - You have not committed any offence within 7 (consecutive) years of being sentenced for the offence **and**
 - You did not serve a custodial sentence at any time (this would exclude serious offences such as murder, manslaughter, rape and causing serious bodily harm) **and**
 - The offence was not a specified offence (specified offences are in the main sexual in nature) **and**
 - You have paid any fine or costs.

Custodial sentences include a sentence of preventive detention and corrective training. Non-custodial sentences include fines, reparation orders, community-based sentences and suspended sentences. Please note that you are not obliged to disclose convictions if you are an eligible individual but can do so if you wish. If you are uncertain as to whether you are eligible please contact the Ministry of Justice.

6. This application form and supporting documents will be held by the school. You may access it in accordance with the provisions of the Privacy Act 1993.

If you have any queries, please contact the person cited in the advertisement.

application for appointment

Position applied for: _____

personal information

Title: Mr Mrs Ms Miss Other (please specify) _____
Please circle one

Full name: _____
Surname *First name(s)*

Address: _____

Telephone: _____
Private *Business*

_____ *Mobile* *Fax*

Email: _____
Private *Business*

**Nationality/
Citizenship:** _____ **Date of Birth:** _____

Are you legally entitled to work in New Zealand? *Please tick one* Yes No
Where appropriate, please attach evidence of eligibility to work in New Zealand (e.g. copy of residence permit, work permit).

**NZ Teacher
Registration:** _____
Registration No. *Registration Status*

_____ *Registration Expiry Date* *MOE No., if known*

Have you ever had your **Teacher Registration** cancelled, been deregistered or had conditions imposed or been refused Teacher Registration in NZ or Overseas Yes No

educational qualifications

**Last secondary level
qualification:** _____

**Tertiary level
qualifications:** _____

**Other relevant
qualifications:** _____

**Specialist
teaching subjects:** _____

employment history

Please outline most recent employment history, beginning with current or latest employment.

<i>From</i>	<i>To</i>	<i>Employer</i>	<i>Position</i>	<i>Immediate Supervisor</i>	<i>Contact Details (if not used as referee)</i>

Are you currently or have you ever been under disciplinary or competence procedures in any previous positions?

Yes No

For the purposes of compliance with the Privacy Act 1993, do you consent to the school contacting your present employer for the purpose of reference checking?

Yes No

medical/health information

Note: The COVID-19 Order Mandate requires all staff in schools to be double vaccinated to protect the health and safety of both staff and students.

Are you double vaccinated against Covid-19? Yes No
(Please provide a copy of your vaccination passport/certificate)
Please note: If evidence of vaccination is NOT provided, we (the employer) deem the applicant not to be vaccinated

Have you had any injury or illness that may affect your ability to effectively carry out the duties and responsibilities of this position? If yes, please describe:

_____ Yes No

Have you had any injury or medical condition caused by gradual process, disease or infection, such as occupational overuse syndrome, stress or repetitive strain injuries, which the tasks of this job may aggravate or contribute to? If yes, please detail:

_____ Yes No

Do you have any other known conditions that may affect your ability to carry out the duties and responsibilities outlined in the job description? If yes, please provide details:

_____ Yes No

Do you smoke? Yes No

I understand that false information given in relation to my health history may result in my loss of entitlement for any compensation from ACC or the Board's workplace accident insurer.

offences against the law

Have you ever been convicted of any criminal offence?

Yes

No

(convictions that fall under the Clean Slate Scheme do not have to be disclosed—please see page 7)

If yes, please provide the date and details of the offence and any penalty imposed, together with any comments you may wish to make.

Have you ever received a police diversion for an offence?

Yes

No

If yes, please detail:

Have you been convicted of a driving offence which resulted in temporary or permanent loss of licence or imprisonment?

Yes

No

If yes, please detail:

Are you awaiting sentencing or do you currently have charges pending?

Yes

No

If yes, please state the nature of the conviction/cases pending:

In addition to other information provided are there any other factors that we should know to assess your suitability for appointment and ability to do the job? If yes, please elaborate:

Yes

No

Please note:

- You may be asked to provide a copy of the relevant court record(s) obtained from the police, and the Board reserves the right to contact authorities to verify any claim made.
- Failure to provide correct and true details on any conviction or other reason for possible unsuitability will make you liable to dismissal from the employment of Tangaroa College Board of Trustees, should you be the successful applicant.

referees

Please provide the names and contact details for three (3) referees, one of whom is a BOT member and/or principal with whom you have worked. At least one of your referees should be able to attest to your work performance. For ease of contact, it is preferred that referees currently reside in New Zealand. *If you have included written references from people other than those recorded below, please note that we may contact the writers of these references.*

Referee 1

Name: _____

Address: _____

Telephone: _____

Private

Business

Mobile

Fax

Email: _____

Private

Business

Relationship to Applicant: _____

Referee 2

Name: _____

Address: _____

Telephone: _____

Private

Business

Mobile

Fax

Email: _____

Private

Business

Relationship to Applicant: _____

Referee 3

Name: _____

Address: _____

Telephone: _____

Private

Business

Mobile

Fax

Email: _____

Private

Business

Relationship to Applicant: _____

declaration

Part A

I, _____ (full name)
consent to the school seeking verbal or written information on a confidential basis about me from representatives of my former employers and/or referees, and authorise the information sought to be released to the Board of Trustees and the Appointments Committee of Tangaroa College, for the purpose of ascertaining my suitability for the position for which I am applying. I understand that the information received by the school is supplied in confidence as evaluative material and will not be disclosed to me.

Part B

I, _____ (full name)
authorise the Board of Trustees of Tangaroa College and its Appointments Committee to make any reasonable enquiries concerning my background to assist in assessing my suitability for the position for which I am applying.

Part C

I, _____ (full name)
declare that to the best of my knowledge and belief the information provided in this application, and in any curriculum vitae enclosed, is accurate. I understand that if any false or misleading information is given or any material fact is suppressed or deliberately omitted, I will not be employed, or if I am employed, my employment will be terminated. I also understand that any false information given in relation to my health history with regard to gradual process, disease or infection can result in my loss of entitlement for any compensation from ACC or the school's workplace insurer.

Signature

Date