## **TEACHING POSITION APPLICATION FORM**

Please email to:

principal@rep.school.nz

Position applied for:

Scale A teacher

PERSONAL DETAILS								
Surname								
Given names								
Preferred name								
Address								
Contact details	HOME		WORK					
	MOBILE		EMAIL					

Certificated Teacher Status	>	Registration No.	Expiry date
Certificated teacher			
Provisionally certificated			
Not certificated			

Present Teaching Position			
School			
Date appointed			
Type of appointment			
Can we contact your principal about this position	n?	YES	NO

	Type of qualification	Date received	Received from
Educational			
Qualifications			

Details of Training and Service
Please include details of your work history for the last 5 years.

SCHOOL	POSITION	DATES	CLASS LEVEL

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

DATES	REASON FOR BREAK

Total certificated	service			
Α	In permanent positions	years	 	months
В	In relieving positions	years		months

## Professional Development

Please provide a summary of recent professional learning and development.

## CONFIRMATION

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					
2	I am currently registered to teach in New Zealand.	YES	NO					
3	<ul> <li>In accordance with the Privacy Act, I authorise the board of trustees to:</li> <li>Obtain further information from the referees listed in this application, and I consent to the referees disclosing such information to the board</li> <li>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.</li> <li>Contact the Education Council.</li> </ul>	YES	NO					
<ul> <li><b>STUDENT SAFETY</b> [Cross out the statement that doesn't apply to you] <ul> <li>I have never been the subject of a complaint about the safety of a student.</li> <li>I have been the subject of a complaint about the safety of a student.</li> <li><i>Please give dates and details:</i></li> </ul></li></ul>								
	<ul> <li>OFFENCES AGAINST THE LAW</li> <li>[Cross out the statements that don't apply to you]</li> <li>I have never been convicted of an offence against the law (excluding minor traffic cor</li> <li>I have no pending charges of an offence against the law.</li> </ul>	nvictions	).					
5	<ul> <li>I have been convicted of an offence against the law. <i>Please give dates and details:</i></li> <li>I have pending charges of an offence against the law. <i>Please give dates and details:</i></li> </ul>							

------Applicant's signature

Date

## REFEREES

Please provide the names and contact details of three referees below. Referees' 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					
Conto et deteile	PRIVATE		WORK		
Contact details	MOBILE		EMAIL		

REFEREE'S DETAILS				
Full name				
Position				
Relationship to the applicant				
Contact details	PRIVATE		WORK	
Contact details	MOBILE		EMAIL	

REFEREE'S DETAILS					
Full name					
Position					
Relationship to the applicant					
	PRIVATE		WORK		
Contact details	MOBILE		EMAIL		