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* **Scale A Teacher**
* **APPLICATION FOR APPOINTMENT**

| A: Personal Details |
| --- |
| * Name:
* Preferred contact number(s)
* Physical address:

Email address:  | * Surname
 |  | * First names
 |  | * Maiden/ previous name
 |  |
| * Personal
 |  | * Professional
 |  |
|  |
| * Personal
 |  | * Professional
 |  |

| Position applied for:(please indicate) | Māori Medium (MMI)English MediumBoth/Either |
| --- | --- |
| Preferred area of school/teaching level: |  | MOE Number: |  |
| If unsuccessful in securing a permanent position, I would like to be considered for a fixed term position. | YesNo |

| B. Training and Employment |
| --- |
| Education History -College of Education/University attended and Qualifications earned: |  |
|  |
|  Present employment | * **Class levels**
 | * **Type\***
 | * **School/Organisation**
 | * **Reason for Leaving**
 | * **Start Date**
 | * **End Date**
 |
|  |  |  |  |  |  |  |
| * Previous employment
 |
| *
 | * **Class levels**
 | * **Type\***
 | * **School/Organisation**
 | * **Reason for Leaving**
 | * **Start Date**
 | * **End Date**
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* *\* Type; P=Permanent, A= Acting, R= Relieving, FT= Fixed Term, PT= Part Time ( show hours per week), BT= Beginning Teacher, JS= Job Share*
* *O= Other, Please specify …………………………………………………………… Please also indicate and give reasons for break .e.g Maternity, travel etc*

| Total Certificated Service |
| --- |
| Permanent positions |  | years |  | months | **Relieving positions** |  | years |  | months |
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| Referees |
| --- |
| Name  | **Relationship to you** | **Position** | **School /Institution** | **Contact phone(s)** | Contact email |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

| * EEO Statistical information
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| --- |
| * Date of birth
 |  | * Ethnic Identities
 | * NZ Maori – NZ European – Pakeha – Asian - Pacific Islander – Other ……………………….
 |
| * Gender
 |  |  |  |

| * Fitness – Suitability for Employment
* *Please give details of any health condition or disability you have that may affect the following:*
* *Please also detail any technical aids, equipment or adaptations to the workplace that would increase your ability to perform the requirements of the role.*
 |
| --- |
| * *Your ability to undertake the requirements of the position for which you are applying*
 |  |
| * *Any medical condition caused by gradual process, disease, or infection that may be aggravated, or further contributed to, by the tasks or positions for which you are applying*
 |  |
| * *Any illness or infectious disease which could create a risk to others in the vicinity of the workplace, or could be aggravated by the work environment.*
 |  |

| * Previous convictions
 |
| --- |
| * Have you ever been convicted of an offence against the law (apart from minor traffic convictions), or otherwise know of any reason why you should not be employed to work in a school environment? Yes / No
 |
| * *If yes, please supply details of the offence:*
* *You may be asked to provide a copy of the relevant Court record(s) from the Registrar of the Court. Failure to provide correct and accurate details of any conviction or reason for possible unsuitability will make you liable to dismissal from the employment of the Nelson Central School Board of Trustees*
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| * Declaration
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| --- |

| * Yes/No
 | * I agree to abide by Nelson Central School’s policies and procedures if appointed.
 |
| --- | --- |
| * Yes /No
 | * I agree to the Nelson Central School Board of Trustees or its agents contacting any past or present employers, associates or professional colleagues in addition to the names supplied as referees.
 |
| * Yes / No

Yes / No | * I declare that all the information given in this application, and accompanying documents, (e.g. CV) is true and correct.
* I understand that this may be verified by the Board or it’s agents, and I allow them to make such inquiries, including with the NZ Teachers Council for Police Vetting purposes.
* I further understand that any appointment is provisional, subject to teacher registration, Police Vetting and identity confirmation as per the requirements of the Vulnerable Children’s Act 2014
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* signed dated
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