

# **Application for Employment**

Note: The completion of this form does not indicate that there is any obligation on the school to engage the applicant.

### Purpose

This information is collected for the purpose of assessing your suitability for employment at Ōtūmoetai College. It is in your interest to supply a Curriculum Vitae in addition to the information sought here which should include a summary of achievements relevant to this position and a statement of your educational philosophy.

## Please Print:

| Position Applied For: Te      | acher in charge              | of Digital Tech | nologies |              |  |  |  |
|-------------------------------|------------------------------|-----------------|----------|--------------|--|--|--|
| Your name in BLOCK LETT       | <u>ERS:</u>                  |                 |          |              |  |  |  |
| Surname:                      |                              |                 |          |              |  |  |  |
| Given Names:                  |                              |                 |          |              |  |  |  |
| Are you known by any other na | me(s)?                       | YES             | NO       | (circle one) |  |  |  |
| Give Details:                 |                              |                 |          |              |  |  |  |
| Date of Birth:                |                              |                 |          |              |  |  |  |
| Address and Telephone Nur     | <u>mbers:</u>                |                 |          |              |  |  |  |
| No. and Street:               |                              |                 |          |              |  |  |  |
| Suburb and Town:              |                              |                 |          |              |  |  |  |
| Home Phone No:                | Home Phone No: Work Phone No |                 |          |              |  |  |  |
| Email Address:                |                              |                 |          |              |  |  |  |
| Teacher Registration:         |                              |                 |          |              |  |  |  |
| Are you a Registered Teacher? |                              | YES             | NO       | (circle one) |  |  |  |
| Registration N                | lumber:                      |                 |          |              |  |  |  |
| Date of                       | Expiry:                      |                 |          |              |  |  |  |
| Number of Years Teaching Exp  |                              |                 |          |              |  |  |  |

| Education: (including University, further education, etc where applicable)              |  |     |    |              |  |  |  |
|---|--|-----|----|--------------|--|--|--|
| University Qualification(s):  |  |     |    |              |  |  |  |
| Bachelor / Masters of :   |  |     |    |              |  |  |  |
|   |  |     |    |              |  |  |  |
| College of Education Qualifications:  |  |     |    |              |  |  |  |
| Diploma of Teaching Specialising in:  |  |     |    |              |  |  |  |
|   |  |     |    |              |  |  |  |
| Ability to teach<br>(if applicable):  |  |     |    |              |  |  |  |
| Subject: eg Chemistry   |  |     |    |              |  |  |  |
| Year Level: eg Year 13  |  |     |    |              |  |  |  |
|   |  |     |    |              |  |  |  |
| Employment History:   |  |     |    |              |  |  |  |
| Present or Most Recent Employer:  | From: To:  |     |    |              |  |  |  |
| School:   |  |     |    |              |  |  |  |
| Address:  |  |     |    |              |  |  |  |
| Position (Subjects Taught):   |  |     |    |              |  |  |  |
|   |  |     |    |              |  |  |  |
|   |  |     |    |              |  |  |  |
|   | ivacy Act 1993 do you consent to the school contacting                 | YES | NO | (circle one) |  |  |  |
| Do you consent to the school contacting oth referees for the purpose of reference check | her current or former colleagues other than your three listed<br>king? | YES | NO | (circle one) |  |  |  |
| Next Most Recent Employer:  | From: To:  |     |    |              |  |  |  |
| School:   |  |     |    |              |  |  |  |
|   |  |     |    |              |  |  |  |
| Have you fulfilled all the contractual obligations of your present position?            |  |     |    | (circle one) |  |  |  |

| Referees: (Give name, address  | and telephone numbers of at least                                      | THREE Referees)   |      |     |              |  |  |
|--|--|---|------|-----|--------------|--|--|
| Name   | Position   | Address   |      | Т   | el No.       |  |  |
|  |  |   |      |     |              |  |  |
|  |  |   |      |     |              |  |  |
|  |  |   |      |     |              |  |  |
|  |  |   |      |     |              |  |  |
| If your application is successful  | are you able to commence empl  | oyment at the beginning of Term 1, 20                         | )22? | YES | NO           |  |  |
|  | verbal or written information abo<br>erees and authorise the informati | ut me from representatives of my<br>on sought to be released. | YES  | NO  | (circle one) |  |  |
| This is necessary for compliance with the Privacy Act  |  |   |      |     |              |  |  |
| If YES   | Signature  | Date:   |      |     |              |  |  |
| <u>General</u> :   |  |   |      |     |              |  |  |
| Have you been convicted of a c   | riminal offence?   |   | YES  | NO  | (circle one) |  |  |
| Are you awaiting the hearing of charges in a civil or criminal court of law? YE              |  |   |      |     | (circle one) |  |  |
| Do you have a current driver's licence? YE   |  |   |      |     | (circle one) |  |  |
|  | Driver's Licence No  | D:::  |      |     |              |  |  |
| Residential Status:  |  |   |      |     |              |  |  |
| Are you a citizen of New Zealan  | ıd?  |   | YES  | NO  | (circle one) |  |  |
| If yes, can you produce evidence if required?  |  |   |      | NO  | (circle one) |  |  |
| If no, do you have the right of permanent residence? YE                                      |  |   |      | NO  | (circle one) |  |  |
| If no, do you have a work permit (production of a Passport is required for verification)? YE |  |   |      | NO  | (circle one) |  |  |

## Medical:

Ōtūmoetai College is an EEO employer and encourages applications from anyone including applicants who may have a disability. However, the Health and Safety in Employment Act requires the employer to identify hazards and to provide a safe place of work. A person's physical state may pose a hazard for themselves and other staff hence the reason for these questions.

| Do you agree to undergo a medical examination if required?          | YES | NO | (circle one) |
|---|-----|----|--------------|
| Are you at present receiving medical treatment and / or medication? | YES | NO | (circle one) |
| If yes, please detail   |     |    |              |

State any serious injury or illness you have sustained that may affect your ability to effectively carry out the functions and responsibilities of the position applied for.

| Do you consent to the school retaining the information contained in this application form for the |     |    |              |
|---|-----|----|--------------|
| purposes of considering your suitability for any position which may arise with Ōtūmoetai College  |     |    |              |
| in the future?  | YES | NO | (circle one) |

### Declaration

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|             |         |          |         |       |             |

the answers in this application are correct and I understand that if any false or deliberately misleading information is given, or any material fact suppressed, I will not be accepted, or if I am employed, my employment will be terminated. I also understand that any false information given in relation to my medical history may result in my loss of entitlement for any compensation from ACC.