# TEACHING POSITION APPLICATION FORM TAURANGA PRIMARY SCHOOL

Please post or email to: **ROLL GROWTH TEACHER Application:** 

Tauranga Primary School – c/o R Caley

31 Fifth Avenue Tauranga 3110

rcaleyl@tauranga.school.nz

			PERSONAL D	ETAIL	S			
	Surname							
Give	en names							
Preferr	ed name							
	Address							
Dat	e of birth							
Conta	ct details	НОИ	ME		WORK			
		МОВ			EMAIL			
Certificated Teacher Status		<b>✓</b>	Registration No.					Expiry date
Certificated teacher								
Provisionally certific	ated							
Not certificated								
Present Teaching Position								
School								
Date appointed								
Type of appointmen	nt							
Can we contact yo	ur principo	al about	this position?		YES	NO		
		Туре	of qualification		Date received	k	Received	d 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 in	dicate any breaks in servic	ce and give reasor	ns, e.g. ov	verseas travel:			
DATES	REASON FOR BREAK						
Total cert	ificated service						
A	In permanent positions	years		months			
В	In relieving positions	years		months			
Please pro	Professional Development						
Please provide a summary of recent professional learning and development.							

## CONFIRMATION 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. 1 **YES** NO 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. 2 I am currently registered to teach in New Zealand. **YES** NO In accordance with the Privacy Act, I authorise the board of trustees to: Obtain further information from the referees listed in this application, and I consent to the referees disclosing such information to the board 3 NO YES Obtain information in relation to my application from persons not listed as referees, and I consent to these persons disclosing pertinent

#### STUDENT SAFETY

[Cross out the statement that doesn't apply to you]

Contact the Education Council.

information to the board.

I have never been the subject of a complaint about the safety of a student.

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I have been the subject of a complaint about the safety of a student. Please give dates and details:

### **OFFENCES AGAINST THE LAW**

[Cross out the statements that don't apply to you]

- I have never been convicted of an offence against the law (excluding minor traffic convictions).
- I have no pending charges of an offence against the law.

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- I have been convicted of an offence against the law. Please give dates and details:
- I have pending charges of an offence against the law. Please give dates and details:
- I know of no reason why I would not be suitable to work with children or **FALSE** 6 TRUE young people.

# 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				
	PRIVATE		WORK	
Contact details	MOBILE		EMAIL	

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

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