

Application Form

Please fill in the following form and send with your CV and cover letter. It must be personally completed and signed by the applicant. All information will be treated in accordance with the Privacy Act 1993.

School Name (please indicate)	SOUTH AUCKLAND MIDDLE SCHOOL
Position	SAMS Math 2021
Name	
Address	
Phone and email	
Eligibility	I am legally eligible to work in NZ as I am: <ul style="list-style-type: none">- A New Zealand citizen- A permanent resident of NZ- A holder of a current Work Permit
Health	Have you any injuries, disabilities or medical conditions which would restrict or prevent you from performing the job you are applying for? Yes No Are you taking any medication which would restrict or prevent you from performing the job you are applying for? Yes No If yes please provide details
Teachers Registration Number	
Qualifications (please list)	
Responsibilities Held	

Number of years teaching	
Please briefly explain why you would like to work in this school?	
Please briefly explain your personal life philosophy?	
Referees	<p>1. Name _____ Company and Position _____ Phone Number _____</p> <p>2. Name _____ Company and Position _____ Phone Number _____</p> <p>3. Name _____ Company and Position _____ Phone Number _____</p>
Declaration	<p>I declare that all information provided on this form and in the accompanying documents are accurate and true. I approve of my stated referees and previous employers being contacted.</p> <p>Please sign _____ Date _____</p>

Thank you for taking the time to complete this application form. We appreciate your interest in this position.