



# ELLESMERE COLLEGE

## TE KĀRETI O WAIHORA

CARING · RESPONSIVE · CHALLENGING

## Job Application Form

### 1. POSITION APPLIED FOR

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### 2. PERSONAL DETAILS

<b>SURNAME:</b>	<b>FIRST NAMES:</b>
<b>FULL POSTAL ADDRESS:</b>	<b>DATE OF BIRTH:</b>
	<b>TELEPHONE NO:</b>
<b>EMAIL ADDRESS:</b>	

### 3. TEACHER REGISTRATION DETAILS

<b>TEACHER REGISTRATION NUMBER</b>	
<b>REGISTRATION EXPIRY DATE</b>	
<b>TYPE OF REGISTRATION</b>	Full STC PTC

### 4. EDUCATIONAL QUALIFICATIONS

<b>QUALIFICATIONS:</b>	<b>INSTITUTION</b>	<b>DATE ATTAINED</b>

### 5. PROFESSIONAL LEARNING & DEVELOPMENT

(PLEASE PROVIDE DETAILS OF PLD OVER THE PAST THREE YEARS)


**6. EMPLOYMENT HISTORY**

**CURRENT OR MOST RECENT POSITION**

<b>POSITION:</b>	<b>SCHOOL:</b>
<b>PRINCIPAL:</b>	<b>PRINCIPAL'S PHONE NUMBER:</b>
<b>START DATE:</b>	<b>FINISH DATE:</b>
<b>POSITION TYPE:</b> FULL TIME PART TIME RELIEVING	<b>REASON FOR LEAVING:</b>
<b>SUBJECTS TAUGHT:</b>	<b>LEVEL OF SUBJECTS TAUGHT:</b>

**PREVIOUS TEACHING EXPERIENCE**

<b>POSITION:</b>	<b>SCHOOL:</b>
<b>PRINCIPAL:</b>	<b>PRINCIPAL'S PHONE NUMBER:</b>
<b>START DATE:</b>	<b>FINISH DATE:</b>
<b>POSITION TYPE:</b> FULL TIME PART TIME RELIEVING	<b>REASON FOR LEAVING:</b>
<b>SUBJECTS TAUGHT:</b>	<b>LEVEL OF SUBJECTS TAUGHT:</b>

**7. OTHER PAID NON-TEACHING EXPERIENCE**

**8. CONVICTIONS AGAINST THE LAW/UNSUITABILITY FOR THE POSITION**

Have you ever been convicted of any offence against the law (apart from minor traffic convictions), or otherwise know of any reason why you should not be employed to work in the school environment?

**Yes**

**No**

(Delete One)

If you have answered **"Yes"**, please provide the date and details of the offence, or other reasons, together with any comments you may wish to make:

**Please Note:** You may be asked to provide a copy of the relevant Court record(s) obtainable from the Registrar of the Court concerned. Failure to provide correct and true details of any

conviction will make you liable to dismissal from the employment of the Ellesmere College Board of Trustees, should you be a successful applicant.

## 9. HEALTH

### HAVE YOU ANY DISABILITIES OR MEDICAL CONDITIONS WHICH:

- May prevent or restrict you from performing any aspect of the job for which you are applying
- May require specific accommodation by the employer or other staff to enable you to perform the job
- May have an impact on the health and safety of yourself, other employees, the students or parents attending the place of work

**Yes**

**No**

(Delete One)

If "Yes" please provide brief details:

## 10. REFEREES

The following person or persons have consented to act as referees.

**NB:** Three (3) referees who have direct knowledge of your professional capabilities are required. I give permission for any member of the appointments committee to contact my referees or any other person that they feel will assist them in assessing my suitability for this position.

### Referee 1

Name:	Position:
Address:	Organisation:
Email:	Phone Number:

### Referee 2

Name:	Position:
Address:	Organisation:
Email:	Phone Number:

### Referee 3

Name:	Position:
Address:	Organisation:
Email:	Phone Number:

**11. CONFIRMATION & DECLARATION:**

I solemnly and sincerely declare that, to the best of my knowledge and belief, the information given in this application is true and correct. I understand that incorrect or misleading information or the omission of important information may disqualify me from appointment, or, if appointed to the position, make me liable for dismissal.

By submitting this application I hereby authorise the collection of personal information from any current or previous employer, training establishment or other agency or individual, for the purpose of determining my suitability for the position for which I am applying, without further reference to me.

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please return all completed applications, accompanied by a letter of application and curriculum vitae to:

**Principal's PA**

**Ellesmere College**

**P O Box 52**

**LEESTON**

[thiand@ellesmere.school.nz](mailto:thiand@ellesmere.school.nz)