



APPLICATION FOR APPOINTMENT

Thank you for applying for this position at Paraparaumu Beach School. This document is written in accordance with the Vulnerable Children’s Act .

1. Please fully complete this form personally. Read it through first, then answer all questions and make sure you sign and date where indicated
2. Failure to complete this application fully and truthfully may result in any offer of employment being withdrawn or appointment being terminated, if any information is later found to be false or misleading.
3. Successful applicants will be asked to give consent to a police vet. It is a requirement in the education Sector for all employees to be vetted.

APPLICATION FOR EMPLOYMENT:

Position applied for:	
Title:	<i>e.g. Miss, Ms, Mrs, Mr -</i>
Surname/Family name:	
First names (in full):	
Any other names you are known by:	<i>e.g. Maiden name or other Christian names</i>
Full postal address:	
Email address:	
Contact phone numbers:	

PROOF OF IDENTITY:

Shortlisted applicants being interviewed will need to provide originals of two types of identification (at least one must be photo ID e.g. passport, drivers licence)

Immigration information:	Are you a New Zealand Citizen?
	If not, do you have resident status or a current work permit?

Information regarding convictions:	Have you ever received a police diversion for an offence? If YES please give details.
	Have you ever been convicted of a driving offence which has resulted in temporary or permanent loss of licence or imprisonment? If YES please give details.
	Are you awaiting sentence or have charges pending? If YES please give details.
	In addition to other information provided are there any other factors that we should know to assess your suitability for appointments and your ability to do the job? If YES please give details.
	Have you ever been the subject of any concerns involving student safety? If YES please give details.

Medical information:	Have you had any injury or medical condition caused by gradual process, disease or infection, such as occupational overuse syndrome, stress or repetitive strain injuries which the tasks of this position may aggravate or contribute to? If YES please give details.
	Have any of the above injuries or medical conditions ever impacted on student safety? If YES please give details.

EDUCATIONAL QUALIFICATIONS:

Please ensure your CV gives details of your Educational Qualifications relevant to this position; Including name of qualification, place of study, and years of study. Copies of qualifications should be in your CV. If successful in your application, originals will need to be sighted.

EMPLOYMENT HISTORY:

Please ensure your CV gives details of your Employment History relevant to this position; Including name of employer/workplace, position held, and time of employment.

REFEREES:

Please provide the names of three people who could act as referees for you. At least one of these should be able to attest to your most recent work performance. If you have included written references from people other than those listed below, please note that we may contact the writers of these references as well.

Name	Contact details (organisation & address)	Phone	Relationship to you

AUTHORITY TO APPROACH OTHER REFEREES:

I authorise the Board, or nominated representative, to approach persons other than the referees whose names I have supplied, to gather information related to my suitability for appointment to this position.	
I authorise the Board, or nominated representative, to access any information held by EDUCANZ to gather information related to my suitability for appointment to this position.	

I certify that:

- The information I have supplied in this application and in my CV is true and correct
- I confirm in terms of the Privacy act 1993 that I have authorised access to referees
- I know of no reason why I would not be suitable to work with children/young people
- 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, maybe liable to be dismissed.

Signature:

Date:

Please return this form with your CV and covering letter to: 65 Gray Avenue, PO Box 1443, Paraparaumu Beach or email to our Office Manager at mbarfoote@pbs.school.nz

Best of luck!

Jess Ward
Principal