



# Raglan Area School

TE KURA A ROHE O WHAINGAROA

## Teacher Employment Information Form

### PERSONAL INFORMATION

Surname	
First Names	
Preferred Title	MR MRS MS MISS DR
Home Address	
Telephone Private	
Telephone Mobile	
Are you legally entitled to work in New Zealand?	YES Where appropriate, please attach evidence of NO eligibility to work in New Zealand.

### EMERGENCY CONTACTS

Name	
Email	
Phone Number	
Address	

### TEACHING REGISTRATION (please attach a verified copy)

Total Length of Certificated Service	
NZ Teacher Registration Number	
NZ Expiry Date for Teacher Registration	

### PROOF OF ID (please attach verified copies of 2 of these documents)

WHAT	Relevant Numbers	Date of Expiry
Driver's License		
Passport		
Birth Certificate		

### HEALTH INFORMATION

Do you have any condition that may affect your ability to carry out the responsibilities of the position/s applied for?	YES / NO
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If you answered YES please specify below:

**CONVICTIONS AGAINST THE LAW**

Have you ever been convicted of any criminal offence (other than a minor traffic offence)?	YES / NO
If you answered YES please specify below:	
Are you currently awaiting the hearing of any charges?	YES / NO

**REFEREES**

Referee 1 Name	
Email	
Phone Number	
Referee 1 Name	
Email	
Phone Number	
Referee 1 Name	
Email	
Phone Number	

**DECLARATION**

<ol style="list-style-type: none"> <li>1. I declare that to the best of my knowledge the information provided in this document is accurate.</li> <li>2. I understand that if any false or misleading information is given, or any material fact suppressed, I will not be employed, or if I am employed, my employment may be terminated.</li> <li>3. I also understand that any false information given in relation to my medical history with regards to gradual process, disease or infection, may result in my loss of entitlement for any compensation from ACC.</li> <li>4. I consent to the school seeking verbal or written information on a confidential basis about me from representatives of my previous employers and/or referees and authorise the information sought to be released to the school for the purposes of ascertaining my suitability for the position(s) for which I have been employed.</li> <li>5. I understand that the information received by the school is supplied in confidence as evaluative material and will not be disclosed to me.</li> </ol>	
Teacher's Signature and Date Signed	

