



RONGOTAI COLLEGE

Application For Employment (Teacher Positions)

Position applied for: _____

Closing Date: _____

A. Personal Information

Full Name: _____
Surname First Name(s)

Mr Mrs Ms Miss (Please Circle)

Address: _____

Telephone _____
Private Mobile
_____ Fax Email

Date of Birth: _____

Ethnicity:

Please tick the ethnic group(s) with which you identify most (maximum of two groups):

NZ European	<input type="radio"/>	Other European	<input type="radio"/>	NZ Maori	<input type="radio"/>	Tongan	<input type="radio"/>
Samoa	<input type="radio"/>	Cook Is Maori	<input type="radio"/>	Fijian	<input type="radio"/>	Other Pac Is	<input type="radio"/>
Indian	<input type="radio"/>	Chinese	<input type="radio"/>	Other Asian	<input type="radio"/>	Other	<input type="radio"/>

Resident Status:

New Zealand Citizen YES / NO If not, do you have a work permit? YES / NO

Teacher Registration:

Do you have a current Practising Teacher's Certificate? YES / NO / HAVE APPLIED

Registration Number: _____ Expiry Date: _____

Ministry of Education Employee Number: _____



B. Educational Qualifications and Training

Please outline your qualifications, beginning with most recent qualification:

Degrees, Diplomas, Certificates or Other Qualifications	Institution	Years	Major subjects and other relevant information

C. Employment History

Please outline your most recent employment history, beginning with current or most recent position:

Position	Place of Employment	Years	Teaching subjects

D. Co-Curricular Activities

A commitment to the corporate life of the school is expected of successful applicants. Please indicate what commitment you would make to cultural or sporting activities at the College:



E. I. T. Skills

Rongotai College provides PC laptops to all teachers. Our Student Management System (SMS) is KAMAR, and Learning Management System (LMS) is Moodle.

Please evaluate your level of I.T. skills (with an X) on the scales below:

	Beginner	Intermediate	Advanced
1. email	----- ----- -----	----- ----- -----	----- ----- -----
2. Web searches	----- ----- -----	----- ----- -----	----- ----- -----
3. Word processing	----- ----- -----	----- ----- -----	----- ----- -----
4. Presentations (eg PowerPoint)	----- ----- -----	----- ----- -----	----- ----- -----
5. Spreadsheets	----- ----- -----	----- ----- -----	----- ----- -----
6. Familiarity with using an approved SMS	----- ----- -----	----- ----- -----	----- ----- -----
7. Creating on-line learning content	----- ----- -----	----- ----- -----	----- ----- -----
8. Familiarity using GOOGLE suite	----- ----- -----	----- ----- -----	----- ----- -----

F. Referees

Please provide names, addresses and phone numbers of three (3) referees who the College may contact. One referee should be a current or previous employing Principal and/or BOT member.

1. Name: _____
School: _____ Position: _____
Home phone: _____ email: _____
Capacity in which you have known this person: _____

2. Name: _____
School: _____ Position: _____
Home phone: _____ email: _____
Capacity in which you have known this person: _____

3. Name: _____
School: _____ Position: _____
Home phone: _____ email: _____
Capacity in which you have known this person: _____



E. Declaration

	Yes	No
Have you ever been convicted of a criminal offence (other than a minor traffic offence)? <i>If yes, please provide further information on a separate sheet.</i>	<input type="radio"/>	<input type="radio"/>
Have you ever been dismissed from a teaching position? <i>If yes, please provide further information on a separate sheet.</i>	<input type="radio"/>	<input type="radio"/>
Have you ever been refused registration or classification as a teacher in any country? <i>If yes, please provide further information on a separate sheet.</i>	<input type="radio"/>	<input type="radio"/>
Have you ever had registration or classification as a teacher cancelled in any country? <i>If yes, please provide further information on a separate sheet.</i>	<input type="radio"/>	<input type="radio"/>
Have you ever had or do you have an injury or medical condition caused by gradual process, disease or infection (such as hearing loss, sensitivity to chemicals, repetitive strain injuries) which the tasks of this job may aggravate or contribute to? <i>If yes, please provide further information on a separate sheet.</i>	<input type="radio"/>	<input type="radio"/>
Would you require any alterations or additions to your work area in order to perform your duties satisfactorily? <i>If yes, please provide further information on a separate sheet.</i>	<input type="radio"/>	<input type="radio"/>
Are you prepared to take a pre-employment medical check?	<input type="radio"/>	<input type="radio"/>
Are you aware of any circumstances or medical condition that the Rongotai College Board of Trustees should take into consideration in deciding whether you are of good character and fit to be a teacher in this school?	<input type="radio"/>	<input type="radio"/>
I consent to the Principal or representatives of the Board of Trustees seeking verbal or written information on a confidential basis about me from referees and/or the Principal of schools in which I have taught or previous employers. I understand that the information received by the school is supplied in confidence as evaluative material and will not be disclosed to me.	<input type="radio"/>	<input type="radio"/>
I consent to the disclosure by the New Zealand or any other Police force of any information they may have pursuant to this application to the New Zealand Teachers' Council	<input type="radio"/>	<input type="radio"/>

I solemnly and sincerely declare that to the best of my knowledge and belief, the information in this application is true and correct. 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 liable to be dismissed.

Applicant's Signature: _____ Date: _____

Note: if completing this electronically, a signed hard copy must be provided.