Ruakākā School Application

_____ (Position applied for) _____ (Date)

Kia ora

Thank you for your interest in working at our kura. Please complete this application, provide a brief letter of application and a CV.

Please send your application to the email address below by the date and time specified in the job advertisement.

Ngā mihi

Helen Kinsey-Wightman
Tumuaki
principal@ruakaka.school.nz

PERSONAL

_____ (Surname)

_____ (First name)

_____ (Preferred name)

Date of Birth: _____

Postal Address: _____

_____

_____

Email Address: _____

Home Phone: _____

Cell Phone: _____

MOE Number: _____

REFEREES

I agree to the referees provided to the Ruakākā School Board of Trustees, in respect to my application, being used for the purposes of considering my suitability for the position.

I also agree that the Board may make further verbal or written inquiry from the referees provided and my previous employer(s).

PRESENT EMPLOYER:

Name of present employer: _____

Email Address:_____

Position held: _____

Work Phone: (0) _____

Other Phone: (0) _____

School: _____

Date commenced: _____

1. Referee's Full Name: _____

Position: _____

Email Address: _____

Contact Phone: _____

Relationship: _____

2. Referee's Full Name:: _____

Position: _____

Email Address: _____

Contact Phone: _____

Relationship: _____

Confirmation

I _____ (name) solemnly and sincerely declare that to the best of my knowledge and belief the information given in this application and in my CV is correct. I understand that if any false or misleading information is given or any material information is suppressed, I will not be employed or, if I am employed, my employment will be terminated. I understand this information may be verified.

_____ _____

Applicant's Signature Date

OTHER INFORMATION

Yes	No

Are you aware of any injury or medical condition which this job may aggravate or contribute to or know of any reason why you might have difficulty effectively carrying out the job description attached? If yes, please give details below:

Yes	No

Do you have a current New Zealand Driver License?

Do you give permission for your police record to be checked?

Are you a New Zealand citizen?

If not, do you have residential status?

A current work permit?

Have you changed your name by deed poll / statutory declaration?

Other names known by: _____

Yes	No

Have you ever been the subject of any concerns involving child safety? If "yes" please give details:

_____

Yes	No

Do you hold a current practising certificate from the Teaching Council of Aotearoa New Zealand?
Please enter your registration number: _____

Yes	No

In addition to other information provided are there any other factors that we should know to assess your suitability for appointment and your ability to do the job? If yes, please detail:

_____

_____

This Application is submitted with the understanding that any further information given is for the use of the employer and their authorised representatives who may at any time have access to this information.

Furthermore, consent is given for members of the Ruakākā School Board or its advisor to make enquiries of my present or past employers or colleagues or any other person who may assist in establishing my suitability for the position at this school including accessing any information used by The Teaching Council of Aotearoa New Zealand.

APPLICANT'S SIGNATURE: _____ DATE: _____