Mt Richmond Special School
APPLICATION FOR EMPLOYMENT

Important Notes for Applicants

Overseas Candidates

- You must have a current teaching registration from the NZ Teaching Council see website for more information.
- You must have a valid New Zealand work visa. Please visit Immigration New Zealand website for more information.

Thank you for applying for a position with our school. Please ensure you have a copy of the position (job) description before completing this application and read the following notes:

1. You need to fill out this form yourself.
2. First, read it through, then answer all questions and make sure you sign and date where indicated on the last page.
3. Attach a current curriculum vitae (CV) containing any additional information, if necessary.
4. Copies only of qualification certificates should be attached. If successful in your application you will be required to provide the originals as proof of qualifications.
5. If you are selected for an interview you may bring whānau/support people at your own expense. Please advise if this is your intention.
6. Failure to complete this application and answer all questions truthfully may result in any offer of employment being withdrawn or appointment being terminated, if any information is later found to be false.
7. Shortlisted applicants being interviewed will need to provide originals of both a primary identity document (e.g., passport) and a secondary identity document (e.g., New Zealand driver license). A list of acceptable primary and secondary documents is available in the last sections of the Children's (Requirements for Safety Checks of Children's Workers) Regulations 2015.
8. This information will be held by the employer. For the successful candidate, this document will be held on their personnel file. Otherwise, the information provided will be securely destroyed after 30 days. You may access it in accordance with the provisions of the Privacy Act 2020.

APPLICATION FOR EMPLOYMENT

Position applied for	Location	Vacancy/Reference Number
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

Surname/Family name	First names (in full)
Click or tap here to enter text.	Click or tap here to enter text.

Date of Birth
Click or tap here to enter text.

Are you known by any other name(s)? (if yes please provide below) Yes ☐ No ☐
Click or tap here to enter text.

Full postal address
Click or tap here to enter text.

Email address
Click or tap here to enter text.

Contact telephone numbers	
Personal: Click or tap here to enter text.	Work: Click or tap here to enter text.

Identity Verification, Criminal Record and Right to Work

Please tick the appropriate boxes:

Immigration information

Are you a New Zealand citizen? Yes ☐ No ☐

If "No":

Do you have resident status? *or* Yes ☐ No ☐

Do you hold a valid visa that allows you to work legally in New Zealand? Yes ☐ No ☐

Have you ever had a criminal conviction? Yes ☐ No ☐

If "Yes" please detail:

Click or tap here to enter text.

(A board may not employ or engage a children's worker who has been convicted of an offence specified in Schedule 2 of the Children's Act 2014 unless they have an exemption. The Clean Slate Act does not apply to Schedule 2 offences.)

Have you ever received a police diversion for an offence? Yes ☐ No ☐

If "Yes"' please detail:

Click or tap here to enter text.

Have you ever been discharged without conviction for an offence? Yes ☐ No ☐

If "Yes" please detail:

Click or tap here to enter text.

Do you have a current New Zealand driver's licence? Yes ☐ No ☐

Have you ever been convicted of a driving offence which resulted in temporary or permanent loss of licence, or imprisonment? Yes ☐ No ☐

If "Yes"' please detail:

Click or tap here to enter text.

Are you awaiting sentencing, or do you have charges pending? Yes ☐ No ☐

If "Yes"' please state the nature of the conviction/cases pending:

Click or tap here to enter text.

In addition to other information provided are there any other factors that we should know to assess your suitability for appointment, your suitability for work with children or your ability to do the job? Yes ☐ No ☐

If “Yes”, please detail: Click or tap here to enter text.
Have you ever been the subject of any concerns involving child safety? Yes ☐ No ☐ If “Yes” please detail: Click or tap here to enter text.
Are you aware of any injury or medical condition that could impact on your ability to perform this job effectively? Yes ☐ No ☐ If “Yes”, please detail Click or tap here to enter text.
For teaching/principal positions: Do you hold a current practising certificate from the Teaching Council of Aotearoa New Zealand? Yes ☐ No ☐ Please enter your registration number: Click or tap here to enter text.

Educational Qualifications

	Name	**Location**	**Number of years completed**	**Highest Qualification Gained**
Secondary School	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
University	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Other	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Other	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

Employment History

Please list your work experience for the last five years beginning with your most recent position. Please include months as well as years worked and explain any gaps in employment. If you were self-employed, give details.

Period worked (please specify the start and end dates) Start date		End date	**Employer's name (or reason for gap in employment)**	**Position held**	**Reason for leaving**
Click or tap here to enter text.	to	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	to	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	to	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

Referees

Please provide the names of three people who we can contact as referees for you. One of these should be your current or most recent employer. Please indicate which referee is your current/previous employer in the table below.

Name	**Organisation**	**Position/ Relationship**	**Phone (preferred)**	**Email**
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

I certify that:

- The information I have supplied in this application is true and correct.
- I confirm, in the terms of the Privacy Act 2020, that I have authorised access to referees so any enquiries deemed appropriate for determining my suitability for employment can be made.
- 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, may be liable to be dismissed.

Signature _____ Date Click or tap here to enter date.