Mathematics Teacher

Applications close 4pm, November 20, 2026.

1. Personal Details

Full name	
Please provide photographic evidence to confirm your identity.	
Address	
Telephone (Home)	
Telephone (Work)	
Telephone (Mobile)	
Email	
Teacher Registration #	
Expiry Date	
Qualifications relevant to the position	

2. Summary of positions held over the past 10 years

Place of work	Position held	Reason for leaving	Period employed

Referees

Please provide the names of two people who could act as referees for you. Please ensure your selected referees can attest to your professional competencies.

Referee 1	
Full name	
Telephone (Mobile)	
Email	
Relationship to applicant	
Years known to applicant	

Referee 2	
Full name	
Telephone (Mobile)	
Email	
Relationship to applicant	
Years known to applicant	

*What are the effective characteristics and skills of being an effective teacher of mathematics **at Fairfield College.** Please note that your response must be personalised to Fairfield College which requires the applicant to demonstrate an awareness of our school, community, values, aspirations, and challenges.*

Please discuss your thoughts about being an effective relief teacher.

Do you wish the Fairfield College to consider any other information? *Please use the following space to provide any additional information that you wish the Board to consider when reflecting on your application.*

General

1) Have you ever been convicted of an offence against the law?	**YES / NO** (Please circle)
If 'YES', please supply relevant details:	
2) I give permission for the Fairfield College Board of Trustees to check my record with the New Zealand Police.	(Please sign here to confirm)
3) To the best of my knowledge the statements in my application and *Curriculum Vitae* are true and accurate. I give permission for these claims to be verified. I understand that the conditions of my employment may be jeopardised if the claims are found to be false.	(Please sign here to confirm)
4) I give permission for the Fairfield College Board of Trustees to gather information from any person or organisation that the Board deems necessary in relation to the job description and person specification.	(Please sign here to confirm)

Signature and Date

_____ _____

(Signature) (Date)

Office use only:

Date the application was received: