APPLICATION FOR APPOINTMENT

Please email to:	applications@lincolnprimary.ac.nz (files must be in PDF format)
Position/s applied for: (tick both if needed)	❑ Fixed Term - preferred level: Yr/s _____ ❑ Permanent - preferred level: Yr/s _____

Personal Details

First Name:			
Surname:			
Address:			
Phone:		**Cell:**	
DoB:			

Registration Details

Number:		**Expiry date:**	
Type:	☐ **Full**	☐ **Provisional**	☐ **Subject to Confirmation**

Employment History

School	Position	Level	From…	To

Please also indicate breaks in service and give reasons, e.g. travel overseas.

(add more rows if needed)

Current Employment

School	Position & Responsibilities	Contact person

Educational Qualifications

Qualifications	Date Awarded…

Referees

Please provide details of two people who can be contacted to verify statements made in your application.

Name	Position	School
Contact	**Work:**	**Home:**

Name	Position	School
Contact	**Work:**	**Home:**

Name	Position	
Contact	**Work:**	**Home:**

DECLARATION

Have you ever:

- Been convicted of an offence against the law? (apart from minor traffic offences) Yes / No
- Received police diversion for an offence, have charges pending or know of any reason why you should not be employed to work in a school environment? Yes / No
- Have you ever been discharged without conviction for an offence? Yes / No
- Are you awaiting sentencing, or do you have charges pending? Yes / No
- Have you ever been the subject of any concerns involving child safety? Yes / No

If you have said YES to any of the above, please provide dates and details of offence(s) on a separate sheet.
Please note that you may be asked to provide a copy of the relevant court records available from the registrar of the court concerned.

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

OTHER INFORMATION

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 give the details below:

I am registered (or provisionally registered) as a New Zealand teacher. (please circle)	Yes	No
Do you have any matters relating to yourself currently or previously before the Teachers Council? (please circle)	Yes	No
Do you have a current New Zealand driver's licence? (please circle)	Yes	No
Do you give permission for your police record to be checked? (please circle)	Yes	No
Have you changed your name by deed poll/statutory declaration? (please circle) *Other names known by:*	Yes	No

Confirmations

PRIVACY ACT 1993 (TO BE SIGNED BY THE APPLICANT)
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.

Please read the following statement carefully, sign and return it with your application.

I agree to the Lincoln Primary School Board of Trustees or its agents approaching my referees for a statement of my abilities in relation to this application.

I give consent to members of the Lincoln Primary School Appointments Committee or its advisor to make enquiries of my present or past employers, colleagues, or any other person who may assist in establishing my suitability for the position of Teacher at this school.

I certify that:

- The information I have supplied in this application is true and correct.
- I confirm, in 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.

Note: If completing this electronically, a hard copy (printed and signed) must be provided upon being offered a position.

To the best of my knowledge, I certify that the information given in this application is correct. I understand that this may be verified.

Signed: _____ Date:_____