Interactive PDF Form

Application for the permanent position of Mathematics Teacher at Aquinas College

Full Name: Mr Mrs Ms Miss	
Preferred Title:	
Address:	
Telephone (Home):	
Telephone (Work):	
Telephone (Mobile):	
Email:	
Teacher Registration #:	
Expiry Date:	
Qualifications relevant to the position:	

SUMMARY OF POSITIONS HELD OVER THE PAST 10 YEARS

School	Position held	Reason for leaving	Period employed

2. PROOF OF IDENTITY

Proof of identity and right to work check

Successful applicant will need to undertake a Police Check and provide originals of two types of identification (one photo ID
e.g. passport, New Zealand driver license and the other a record ID e.g. birth certificate, bank statement, a bill).

PLEASE ANSWER YES OR NO:	*Yes*	*No*
Immigration information:		
Are you a New Zealand citizen?		
If not, do you have resident status?		
A current work permit?		
Have you ever had a criminal conviction? *(convictions that fall under the clean slate scheme do not have to be* *disclosed) If "Yes", please detail:*		
Have you ever received a police diversion for an *offence? If "Yes", please detail:*		
Have you ever been discharged without conviction for an *offence? If "Yes", please detail:*		
Have you ever been convicted of a driving offence which resulted in temporary or permanent loss of licence, or imprisonment? *If "Yes", please detail:*		
Are you awaiting sentencing or have charges pending? *If "Yes", please state the nature of the conviction/cases pending:*		
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 elaborate:*		

PLEASE ANSWER YES OR NO:	*Yes*	*No*
Have you ever been the subject of any concerns involving child safety? *If "Yes", please detail:*		
Have you had any injury or medical condition caused by gradual process, disease or infection, such as occupational overuse syndrome, stress or repetitive strain injuries, which the tasks of this position may aggravate or contribute to? *If "Yes", please detail:*		
Do you have a current New Zealand driver's licence?		

3. REFEREES

Please provide the names of two people who could act as referees for you. At least one of these should be able to attest to your most recent work performance (please indicate in the table below).

Referee 1:	
Full name:	
Address:	
Telephone (Home):	
Telephone (Work):	
Telephone (Mobile):	
Email:	
Relationship to applicant:	
Years known to applicant:	

Referee 2:	
Full name:	
Address:	
Telephone (Home):	
Telephone (Work):	
Telephone (Mobile):	
Email:	
Relationship to applicant:	
Years known to applicant:	

4. GENERAL

	(Please sign each section below to confirm)
I give permission for the Aquinas College Board of Trustees to check my record with the New Zealand Police.	
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 jeopardized if the claims are found to be false.	
I confirm in terms of the Privacy Act 1993 that I have authorised access to referees.	
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.	
By submitting this application I hereby authorise the collection of personal information from any current or previous employer, training establishment or other agency or individual, for the purpose of determining my suitability for the position for which I am applying, without further reference to me.	

DO YOU WISH THE BOARD TO CONSIDER ANY OTHER INFORMATION?

Please use the following space to provide any additional information that you wish to be considered.

7. SIGNATURE AND DATE

I solemnly and sincerely declare that, to the best of my knowledge and belief, the information given in this application is true and correct. I understand that incorrect or misleading information or the omission of important information may disqualify me from appointment, or, if appointed to the position, make me liable for dismissal.

Please send the completed application forms, cover letter and CV to the confidential email:
executiveassistant@aquinas.school.nz *by noon Friday 20 November 2026.*