St Mary's College

Teaching Staff Application Form

St. Mary's College Vision: 21st Century Women of Mercy

St. Mary's College Mission:
Our mission is to:
- Value and practice the teachings of the Catholic Church and the spirit of Mercy
- Nurture and engage St Mary's students in building their relationship with Jesus through the Catholic faith
- Provide an environment based on whanaungatanga (relationships) and manaakitanga (caring for each other) through which the community is connected and supported
- Foster the pursuit of excellence in all endeavours
- Inspire and assist each individual to reach their potential
- Honour the Treaty of Waitangi and the unique place of Tangata Whenua in Aotearoa New Zealand and seek to follow its principles

Mercy Values: Excellence, Respect, Justice, Service, Compassion, Care for the Poor and Vulnerable, Hospitality

College Website: https://www.stmaryak.school.nz/

Please note:
This is a confidential document. Its contents will be held by the College and disclosed only to those assisting with the appointment process. At the conclusion of the appointment process, this application:
- Will be destroyed if the application is unsuccessful
- Will be held on the confidential personnel file of the successful candidate

Position Details	
Vacancy Applying For	
Closing Date	

Personal Information	
Title	
First Name	
Last Name	
If you have taught under another name, please indicate	
Postal Address	
Contact Phone Number	
Email	
Date of Birth (optional)	
Religion (optional)	

Citizenship/Right to Work (If applicable please attach a photocopy of the visa with your application)					
Are you a New Zealand citizen?		Yes			No – go to the next question
Do you have Permanent Residence status?		Yes			No – go to the next question
Do you have a current Work Permit		Yes			No – you may not be eligible to be employed in New Zealand
		Visa Type			
		Visa Number			

New Zealand Practising Certificate https://teachingcouncil.nz								
Teacher Practising Certificate Number								
Teacher Practising Certificate Expiry								
Certificate Status		Tūturu | Full Practising Certificate (Category One)		Tiwhikete Whakaakoranga Tōmua Provisional		Pūmau / Full Practising Certificate (Category Two) Subject to Confirmation		Returning to Teaching in Aotearoa New Zealand Practising Certificate

Present Employment	
Present Employer	
Address	
Contact Phone	
Position Held (include MU/allowances if applicable)	
Subjects and Year Levels Taught	
Date Commenced	

Employment History (continue separately if necessary)					
Position Held	Organisation	Address of Organisation	Date From	Date To	Reason for Leaving

Relevant Qualifications/Certificates – include teacher training			
Institution	Year/s	Qualification/Certificate Attained	Date Awarded

Subjects Able to Teach (please include year levels)				

Co-curricular activities that you could actively support				

Referees – at least one of these referees should be able to attest to your work performance. If you have included written reference from people other than those named below, please note that we may contact the writers of those references.	
Referee One	
Name	
Position	
Address	
Contact Phone Number	
Email	
Relationship to Applicant	
Referee Two	
Name	
Position	
Address	
Contact Phone Number	
Email	
Relationship to Applicant	
Referee Three	
Name	
Position	
Address	
Contact Phone Number	
Email	
Relationship to Applicant	

Professional Memberships

Other Information

	Yes	No	If "Yes" please detail:
Have you ever had a criminal conviction? *(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. The Clean Slate Act does not apply to schedule 2 offences)*			
Have you ever received a police diversion for an offence?			
Have you ever been discharged without conviction for an offence?			
Do you have a current New Zealand driver's licence?			Number:
Have you ever been convicted of a driving offence which resulted in temporary or permanent loss of licence, or imprisonment?			
Are you awaiting sentencing, or do you have charges 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?			
Have you ever been the subject of any concerns involving child safety?			
Are you aware of any injury or medical condition that could impact on your ability to perform this job effectively?			

Privacy

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

Furthermore, consent is given for the members of the St. Mary's College Board of Trustees or nominated representative to make enquiries of my present or past employers or colleagues or any other person who may assist in establishing my suitability for appoint to the position.

Applicant Signature	Date

Evidence of Identity

Please attach to your application two forms of identification as detailed below. If shortlisted, please bring originals with you so that these can be sighted.

- ☐ Primary Identification Document
  This includes NZ passport, overseas passport, NZ emergency travel document, NZ refugee's travel document, NZ certificate of identity, NZ firearms licence, NZ full birth certificate (issued on or after 1/1/1998 and must carry a unique ID number), NZ citizenship certificate
- ☐ Secondary Identification Document
  This includes NZ drivers' licence, 18+ card, Community Services Card, Super Gold/Veteran Super Gold card, NZ student photo identification, NZ employee photo identification care, NZ electoral roll record, IRD number, NZ issued utility bill (issued no more than 6 months earlier)
- ☐ One of the above must be photographic

If this is problematic, please contact the school as there are other ways to meet this requirement.

Other Information to Be Submitted	
	Formal letter of application
	CV
	Evidence of Identity documentation

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
	I know of no reason why I would not be suitable to work with young people/children
	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.
Applicant Signature	
Date	