234 Regent Street
PO Box 740, Invercargill
New Zealand
+64 3 211 6040
office@auroracollege.school.nz
www.auroracollege.school.nz

APPLICATION FOR EMPLOYMENT

Position: Year 9 Homebase Teacher

Applicants are asked to complete this Application for Employment form and return it with a covering letter of application and a Curriculum Vitae for the position applied for. Your Curriculum Vitae should contain the following:

Under the Privacy Act 1993, all information provided will be treated as confidential and will be made available only to those involved in the selection and appointment process.

We will destroy unsuccessful applicants' curriculum vitae once the appointment process is complete. For ease of processing and photocopying, please do not send CVs and applications bound or in folders.

PERSONAL DETAILS

Title (eg Mr, Ms, Mrs, Dr):

Family Name: **First Name(s):**

Postal Address:

Teacher Reg. No: **Expiry Date:**

Contact details:

Primary phone number:

Leave message Don't leave message

Secondary phone number:

Leave message Don't leave message

Email address:

CURRICULUM VITAE CHECKLIST

Please check that you have supplied the required information and mark the boxes off as you go.

- Full employment history (most recent position first)
- Education, training and qualifications relevant to this position.
- Specific skills, strengths and abilities relevant to this position.
- Names and contact details of three referees, who have recent professional contact with you and who can substantiate your suitability for this position.
- Any other relevant information and experience.

CITIZENSHIP *(please tick the appropriate box)*

- NZ Citizen
- Require NZ Work Permit
- Permanent NZ Resident
- Hold NZ Work Permit

HEALTH

The information under the heading Health is required to assist the School to meet its obligations under the Health and Safety Act 1992 and the Accident Rehabilitation and Compensation Insurance Act 1992. The Acts require that where possible, we should reasonably accommodate applicants with such conditions.

Have you had an injury or medical condition caused by gradual process, disease or infection - for example, hearing loss, sensitivity to chemicals, repetitive strain injuries - which the tasks of this job may aggravate or contribute to?

- Yes
- No

If yes, please give details and describe any technical aids, equipment or adaptations to the workplace which you would need to make your work easier and/or increase your performance.

COURT CONVICTIONS

The information under the heading Court Convictions is required because some convictions will be unacceptable in some positions. If yes, you may be asked for further details at interview.

Have you been convicted of any offence against the law in the last ten years?

Yes
No

Are you awaiting sentencing/currently have charges pending?

Yes
No

PROFESSIONAL CONDUCT AND CONFLICTS

Have you ever been dismissed from an employment position?

Yes
No

Are you currently the subject of any disciplinary or competency proceedings by a previous employer or the Teaching Council of Aotearoa New Zealand?

Yes
No

Do you have any conflicts of interest (e.g., family members employed by or attending the school) that the selection panel should be aware of?

Yes
No

(If you answered 'Yes' to any of the above, please provide details on a separate sheet).

REFEREES

Provide details of people who may be contacted to provide reference statements. Two referees are required; however, you may include a further referee if you wish.

Referee 1 Name:
Position:
Capacity known to you:
Primary phone number:
Email:

Referee 2 Name:
Position:
Capacity known to you:
Primary phone number:
Email:

Referee 3 Name:
Position:
Capacity known to you:
Primary phone number:
Email:

DECLARATION

I declare that to the best of my knowledge, the answers to the questions asked here and all information submitted with my application are correct. I understand that if any false information is given, or any material fact suppressed, I may not be employed, or if I am employed, I may be dismissed.

I give consent to the Aurora College Board or appointed advisor to contact my referees in relation to my application for this position and to make inquiries to previous employers, or other persons, or institutions deemed necessary to satisfy the Board as to the suitability of the applicant for a position at Aurora College.

Signature: **Date:**