



TE PAEPAE O AOTEA

Kia eke atu ki Taupaenui o te tangata

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TE PAEPAE O AOTEA APPLICATION FOR EMPLOYMENT Important Information for Applicants

Thank you for applying for a position with our school. Please ensure you have a copy of the position description (Person Specification and Job Description) before completing this application.

1. Please fully complete this form personally. First, read it through, then answer all questions and make sure you sign and date where indicated on the last page.
2. Attach a curriculum vitae (CV) containing any additional information, if necessary.
3. Copies only of qualification certificates should be attached. If successful in your application, you will be required to provide the originals as proof of qualifications.
4. If you are selected for an interview you may bring whānau/support people at your own expense. Please advise if this is your intention.
5. Failure to complete this application and answer all questions truthfully may result in any offer of employment being withdrawn or appointment being terminated, if any information is later found to be false.
6. All applicants will be required to give consent to a Police vet.
7. a) Applicants may not be employed as a children's worker if they have been convicted of a specified offence listed in [Schedule 2 of the Children's Act 2014](#), unless they obtain an exemption. The Criminal Records (Clean Slate) Act 2004 will not apply to these specified offences and these offences will be included in your Police vetting results.
b) The Clean Slate Act provides certain convictions do not have to be disclosed providing:
 - you have not committed any offence within 7 consecutive years of being sentenced for the offence
 - you did not serve a custodial sentence¹ at any time
 - the offence was neither a [specified offence under the Clean Slate Act 2004](#) nor a [specified offence under the Children's Act 2014](#)
 - you have paid any fines or costs

Please note that you are not obliged to disclose convictions if you meet the above conditions but can do so if you wish. If you are uncertain as to whether you are eligible contact the Ministry of Justice.

8. Shortlisted applicants being interviewed will need to provide originals of both a primary identity document (e.g. passport) and a secondary identity document (e.g. New Zealand driver license). A list of acceptable primary and secondary documents is available in the last sections of the [Children's Regulations 2015](#).
9. This information will be held by the employer. For the successful candidate this document will be held on their personal file, otherwise the information provided will be securely destroyed after 90 days. You may access it in accordance with the provisions of the Privacy Act 1993.

Custodial sentence means a sentence of imprisonment and includes corrective training, preventive detention, a sentence of imprisonment served by home detention, borstal training, detention centre training and any other sentence that requires the full-time detention of an individual. **Non-custodial sentence** includes, but is not limited to, a community-based sentence, a sentence of home detention, a sentence of a fine or reparation, a suspended sentence of imprisonment, and a specified order.

APPLICATION FOR EMPLOYMENT

Position applied for

Tick one

Mr

Mrs

Ms

Miss

Or other preferred title:

Surname/Family name

First names (in full)

<input type="text"/>	<input type="text"/>
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Birth name (if applicable)

Are you known by any other name(s)? (if yes please provide below)

Yes No

Full postal address

Email address

Contact telephone numbers

Personal: <input type="text"/>	Business: <input type="text"/>
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Identity Verification, Criminal Record and Right to Work

Please tick the appropriate boxes:

<u>Immigration information</u>		
Are you a New Zealand citizen?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If not, do you have resident status, or	Yes <input type="checkbox"/>	No <input type="checkbox"/>
A current work permit	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever had a criminal conviction?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If "Yes" please detail:		
<i>(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.)</i>		
Have you ever received a police diversion for an offence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If "Yes" please detail:		
Have you ever been discharged without conviction for an offence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If "Yes" please detail:		
Do you have a current New Zealand driver's licence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been convicted of a driving offence which resulted in temporary or permanent loss of licence, or imprisonment?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If "Yes" please detail:		
Are you awaiting sentencing or do you have charges pending?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If "Yes", please detail:		

Have you ever been the subject of any concerns involving child safety? Yes No

If "Yes" please detail:

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 detail and provide information of what support you require to undertake this work safely:

For teaching/principal positions:

Do you hold a current practicing certificate from the Teaching Council of Aotearoa New Zealand? Yes No

Please enter your registration number:

Qualifications relevant to the position

Subject Strengths

Supporting Subjects

Employment History

Please list your work experience, beginning with your most recent position. Please include months as well as years worked and explain any gaps in employment. If you were self-employed, give details. Attach additional sheets if necessary.

Period worked (please specify the start and end dates)		Employer's name (or reason for gap in employment)	Position held	Reason for leaving
Start date	End date			
	to			
	to			
	to			
	to			
	to			
	to			

Referees (Please provide three referees)

Referee Note: Only shortlisted candidates will be required to submit Referee's Reports;! however, should you apply for the position you are advised to let your referees know in order! for them to have time to prepare. Should you be shortlisted, your referees are requested to complete the Referee's Report in the time-frame between shortlisting to interview. If you have included written references from people other than those recorded below, please note that we may contact the writers of these references.

I authorise the Board, or nominated representative, to approach persons other than the referees whose names I have supplied, to gather information related to my suitability for appointment to the position. Yes No

I authorise the Board, or nominated representative, permission to access any information held by the Teaching Council of Aotearoa New Zealand or any other educational organisation, including information regarding matters under investigation, to gather information related to my suitability for appointment to the position. Yes No

Name	Organisation	Position/ Relationship	Email address (preferred)	Mobile

DECLARATION

I certify that:

- I confirm in terms of the Privacy Act 1993 that I have authorised access to referees. I understand that the information received by the school is supplied in confidence as evaluative material and will not be disclosed to me.
- I know of no reason why I would not be suitable to work with children/young people
- I declare that to the best of my knowledge the information provided in this application and in any curriculum vitae enclosed is accurate and I understand that if any false or misleading information is given, or any material fact is suppressed or deliberately omitted, I will not be employed, or if I am employed, my employment will be terminated. I also understand that any false information given in relation to my medical history with regards to gradual process, disease or infection can result in my loss of entitlement for any compensation for ACC.

Signature _____

Date:

Note: digitally signed applications will be accepted

Please email your application form to: appointmentshawera@gmail.com