



## Application for Employment

Thank you for applying for a position within our school. Please fully complete this form and send it along with a covering letter and your CV to

Janine Hills (jlh@lphs.school.nz)  
Senior Management Executive

Position applied for: \_\_\_\_\_

### Personal Information

**Title:** *Please circle one* Mr Mrs Ms Miss Other (*please specify*) \_\_\_\_\_

**Full name:** \_\_\_\_\_  
*Surname* *First name(s)*

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Telephone:** \_\_\_\_\_  
*Private* *Work* *Mobile*

**Email:** \_\_\_\_\_  
*Private* *Work*

**Nationality/  
Citizenship:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

Are you legally entitled to work in New Zealand? *Please tick one* Yes  No

If yes (and you are not a NZ citizen), please attach evidence of eligibility to work in New Zealand (e.g. copy of residence permit, work permit).

# NZ Teacher Registration (Teaching Positions Only)

\_\_\_\_\_  
*Registration No.*

\_\_\_\_\_  
*Registration Status*

\_\_\_\_\_  
*Registration Expiry Date*

\_\_\_\_\_  
*MOE No., if known*

Have you ever had your Teacher Registration cancelled, been deregistered or had conditions imposed or been refused Teacher Registration in NZ or Overseas

*Please tick one*

Yes

No

## Educational Qualifications

**Last secondary level Qualification (*Non-teaching Positions Only*):**

\_\_\_\_\_

**Tertiary level qualifications:** \_\_\_\_\_

\_\_\_\_\_

**Other relevant qualifications:**

\_\_\_\_\_

\_\_\_\_\_

**Specialist teaching subjects: (*Teaching Positions Only*):** \_\_\_\_\_

\_\_\_\_\_

## Employment History

Please outline the most recent employment history, beginning with current or latest employment.

From	To	Employer	Position	Immediate Supervisor	Contact Details (if not used as referee)

Are you currently or have you ever been under disciplinary or competence procedures in any previous positions?

Yes   No

For the purposes of compliance with the Privacy Act 1993, do you consent to the school contacting your present employer for the purpose of reference checking?

Yes   No

## Medical/Health Information

Have you had any injury or illness that may affect your ability to effectively carry out the duties and responsibilities of this position? If yes, please describe:

Yes  No

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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 job may aggravate or contribute to?

Yes  No

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Do you have any other known conditions that may affect your ability to carry out the duties and responsibilities outlined in the job description?

Yes  No

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## Offences against the Law

Have you ever been convicted of any criminal offence?

Yes  No

If yes, please provide the date and details of the offence and any penalty imposed, together with any comments you may wish to make.

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Are you awaiting sentencing or do you currently have charges pending?

Yes  No

If yes, please state the nature of the conviction/cases pending:

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## Referees

Please provide the names and contact details for three (3) referees, one of whom is your current supervisor. At least one of your referees should be able to attest to your work performance. If you have included written references from people other than those recorded below, please note that we may contact the writers of these references.

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### Referee 1

**Name:** \_\_\_\_\_

**Address:**  
\_\_\_\_\_

**Telephone:** \_\_\_\_\_  
*Private* *Work* *Mobile*

**Email:** \_\_\_\_\_  
*Private* *Work*

**Relationship to Applicant:** \_\_\_\_\_

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### Referee 2

**Name:** \_\_\_\_\_

**Address:**  
\_\_\_\_\_

**Telephone:** \_\_\_\_\_  
*Private* *Work* *Mobile*

**Email:** \_\_\_\_\_  
*Private* *Work*

**Relationship to Applicant:** \_\_\_\_\_

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### Referee 3

**Name:** \_\_\_\_\_

**Address:**  
\_\_\_\_\_

**Telephone:** \_\_\_\_\_  
*Private* *Work* *Mobile*

**Email:** \_\_\_\_\_  
*Private* *Work*

**Relationship to Applicant:** \_\_\_\_\_

# Declaration

I, \_\_\_\_\_ (full name)

## **Part A**

consent to Logan Park High School seeking verbal or written information on a confidential basis about me from representatives of my former employers and/or referees, and authorise the information sought to be released to the Board of Trustees of Logan Park High School or its delegee, for the purpose of ascertaining my suitability for the position for which I am applying. I understand that the information received by the school is supplied in confidence as evaluative material and will not be disclosed to me.

## **Part B**

consent to Board of Trustees of Logan Park High School or its delegee to make any reasonable enquiries concerning my background to assist in assessing my suitability for the position for which I am applying.

## **Part C**

declare that to the best of my knowledge and belief the information provided in this application, and in any curriculum vitae enclosed, is accurate. 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 health history with regard to gradual process, disease or infection can result in my loss of entitlement for any compensation from ACC or the school's workplace insurer.

## **Part D**

Within this context, of the Vulnerable Children Act (VCA) 2014 which requires that all people who work or are likely to work with children must be safety checked there are no reasons, including past events, as to why I would pose any risk whatsoever to children?

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*