

NAENAE COLLEGE

APPLICATION FOR EMPLOYMENT

Position applied for:					
Where and when advertised:					
Teacher registration number:			Expiry:		
Teacher Registration Type:					
Section 1: PERSONAL INFORMATION					
Title:		Email:			
First name(s):		Family na	name:		
Residential address:					
Phone No.		Mobile I	Mobile No.		
Date of Birth:		Marital S	Status: (optional)		
Section 2: EMPLOYMENT HISTORY					
Have you previously been employed by a secondary school or other educational provider?					
		☐ YES N	NO \square		
Please attach cv outlining employment details					
Section 3: QUALIFICATIONS					
Please provide relevant academic or vocational qualifications					
Qualification			Date:		
Qualification			Date:		
Qualification			Date:		
Qualification			Date:		
Section 4: REFEREES					
Please provide at least three employment references. One should be your current or most recent Principal.					
1. Name			Phone:		
Organisation			Mobile:		
2. Name			Phone:		
Organisation			Mobile:		
3. Name			Phone:		

Do you give your consent for any relevant information named referees current/previous employers?	n relating to this position to be obtained from the			
☐ YES	□ NO			
Have you ever been convicted of any offence against know of any reason why you should not be employed	the law (apart from traffic convictions) or otherwise d to work in the school?			
☐ YES	□ NO			
Are you a New Zealand citizen?				
☐ YES	□ NO			
If you answered NO, do you have the legal right to w work visa)?	ork in New Zealand (Permanent Resident or valid			
☐ YES	□ NO			
☐ I give Naenae College permission to make enquiries as they see fit in relation to my application and to seek information about my employment and personal background from nominated referees. I understand that this information will be treated in complete confidence, and only used for staff selection purposes.				
Section 5: HEALTH				
Do you have any health issues that could impact your work? YES NO				
If Yes, please provide details:				
Please check:				
1. Please attach your covering letter and Curriculum Vitae.				
Please fully complete this form personally. Read it through first then answer all questions and make sure you sign and date where indicated.				
 Failure to complete this application and answer all questions truthfully may result in any offer of employment being withdrawn, or appointment being terminated if any information is later found to be false. 				
Section 6: D	ECLARATION			
I,of my knowledge and belief the information give	, (full name) declare that to the best en in this application is true and correct.			
Signature:	Date:			