

Application For Employment

Position Applied for:	
Permanent / Fixed Term:	
PERSONAL DETAILS	
Name in full (any alternative to naming conventions here?):	
Preferred name:	
Email:	
Phone Number:	
Address:	
Postcode:	
NZ Citizen: YES / NO If not, do you have a NZ Work Permit: YES	/ NO
Criminal Conviction: YES / NO Discharge without Conviction: YES	/ NO
Details:	

Are there any health related conditions which could impact on your ability to perform the position applied for:					
Details of th	e health relatec	I conditions, including what, if any, rea	asonable steps		
can be taken to accommodate these conditions:					
	NT INFORMATI				
Teacher Reg	istration Numb	er:			
Teacher Reg	istration Expiry	Date:			
Current and	Previous Teacl	ning Positions: Preferably for up to f	ive years		
From	То	Employer	Position		
Leaving Rea	son				
From	То	Employer	Position		
Leaving Rea	son				
From	То	Employer	Position		
Leaving Rea	son				

Degree	University	Year
Other Qualifications:		
Other Guamications.		
Relevant Experience:		
REFEREES (note - no contact will be made without	first obtaining the consent of the ap	plicant):
		pcarrey.
Name:		
Phone:	Email:	
Capacity in which you have known this porson.		
Capacity in which you have known this person:		
Name:		
Phone:	Email:	
Capacity in which you have known this person:		
Name		
Name:		
Phone:	Email:	
Capacity in which you have known this person:		

Any other additional information you consider relevant:				
DECLARATION:				
I declare that to the best of my knowledge the information provided in this application form and the information provided in the Curriculum Vitae and any accompanying documentation is correct. I understand that if any false or misleading information is given, or any material information suppressed, I will not be employed, or if I am employed, my employment will be terminated:				
Applicant's Full Name:				
Applicant's Signature (add your scanned signature here) Dat	e:			