

APPLICATION FORM

TEACHER POSITION

PLEASE READ THIS SECTION CAREFULLY BEFORE WRITING YOUR APPLICATION. IT CONTAINS IMPORTANT CHECK POINTS FOR YOU TO FURNISH A SUCCESSFUL APPLICATION

- Complete this Kindergarten Taranaki application form
- Complete a covering letter that outlines an overview of your suitability for this position – refer to the advertisement on the Kindergarten Taranaki website for information about this position www.kindergartentaranaki.co.nz go to *Work for us – Teacher* tabs

Include your CV (no more than 5 pages) which includes the following:

- Your Employment History –
 - *State actual dates, e.g. 15 June 2021 to 31 Dec 2023*
 - *include any gaps in teaching service for previous five (5) years and the reason for the gap*
- Qualifications (colour copy verified by a Justice of the Peace)
- Recent PLD and the impact on your teaching
- Strengths, skills, interests and expertise relevant to this position
- Personal philosophy statement

In addition, please write to each of our Teaching Standards giving specific examples of practice and the impact on children’s learning.

- Te tiriti o Waitangi partnership
- Professional learning
- Professional relationships
- Learning focused culture
- Design for learning
- Teaching

SECTION 1: PERSONAL INFORMATION

Full Name: _____

Former Name: _____

Address: _____

_____ Postcode _____

Email: _____

Home ph: () _____ Work ph: () _____

Mobile: _____ Current
NZ Driver Licence No: _____

SECTION 2: POSITION APPLYING FOR

Kindergarten: _____ Position: _____

Closing Date: _____

SECTION 3: QUALIFICATIONS

ECE Qualification (Diploma / Degree / Postgraduate): _____

Date awarded: _____

NB: If granted equivalency by the NZ Qualification Authority a copy of equivalency certificate must be enclosed

Other Tertiary Qualifications: _____

PLEASE INDICATE YOUR TEACHER STATUS:

- Beginning Teacher (less than two years early childhood teaching experience)
- Fully Registered Teacher (two to five years EC teaching experience)
- Experienced Teacher (EC teaching experience beyond five years)

Teacher Registration Number: _____ Expiry date: _____

Category: _____

Current First Aid Certificate Yes / No Date Issued _____

SECTION 4: PRIOR SERVICE - refer to Employment History above

Dates from/to	Total Years & Months	Hours per week	Qualified Teacher? No/Yes	Position Title	Employer	Proof of Service attached

SECTION 5: NOMINATE THREE REFEREES

Choose referees who can attest to your professional ability. One of these should be your current or immediate past employer. Referees of short-listed candidates only will be contacted. Please ensure daytime contact details are given.

REFEREE 1: (CURRENT OR IMMEDIATE PAST EMPLOYER)

Name: _____

Position: _____

Address: _____

Mobile: _____

Email: _____

REFEREE 2:

Name: _____

Position: _____

Address: _____

Mobile: _____

Email: _____

REFEREE 3:

Name: _____

Position: _____

Address: _____

Mobile: _____

Email: _____

SECTION 6: DECLARATIONS

MEDICAL DECLARATION:

Is there any reason why you may not be able to perform the essential functions of the position you are applying for?

Yes / No If "yes" please provide brief details

Applicant Signature: _____ **Date:** _____

CONVICTION DECLARATION:

Are you awaiting hearing of any charges for any offence against the law? Yes / No

Have you ever been charged with or convicted of an offence against the Law Yes / No
(apart from minor traffic violations)?

If yes, please provide date and details of offence/s on a separate sheet. You may be asked to provide a copy of the relevant court records from the Registrar of the Court concerned.

Applicant Signature: _____ **Date:** _____

NB: Applicants must disclose all criminal convictions unless covered by the Clean Slate Act 2004 – go to the Ministry of Justice website for further information.

PERSONAL INFORMATION DISCLOSURE AUTHORITY:

I, _____ hereby authorise the collection of personal information from any current or previous employer, training establishment, other agency or individual, for the purpose of determining my suitability for the position for which I am applying without further reference to me.

Please specify below any agency or individual to whom you do not wish an approach to be made in relation to this application.

NB: Your authority is required in accordance with the provisions of the Privacy Act 1993.

PRIVACY ACT 1993:

This application is submitted with the understanding that any information given is for the use of the employer who may at any time have access to this information. I agree to Kindergarten Taranaki approaching my referees for a statement of my abilities in relation to this application. Furthermore, consent is given for Kindergarten Taranaki to make enquiries of my present or past employers, colleagues or any other person who may assist in establishing my suitability for this position.

Applicant signature: _____ **Date:** _____

I, _____ (full name) solemnly and sincerely declare that to the best of my knowledge the information given in this CV and application is correct. I understand that if any false or misleading information is given, or any material fact suppressed, I may not be accepted or, if I am employed may lead to dismissal.

Applicant Signature: _____ Date: _____

Before emailing your application to recruitment@kindergartentaranaki.co.nz have you completed the following?

- Completed and signed the Application Form - 3 Referees listed
- Covering Letter
- Curriculum Vitae including comments on how you meet our Teaching Standards (Teaching Council New Zealand / Matatū Aotearoa) including specific examples of your practice
- Qualifications/NZQA equivalency (certified as true copy)
- Registration/Practising Certificate (current)
- First Aid Certificate (current)