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Application Form

Important Notes for Applicants

Thank you for applying.

1. Please fully complete this form personally and sign and date where indicated on the last page.
2. Attach a covering letter (maximum two pages A4) outlining the strengths and abilities you bring to this position.
3. Attach a Curriculum Vitae (CV) (maximum five pages A4)
Please also include a recent photo.
4. Copies only of qualification certificates should be attached. If successful in your application, you will be required to provide originals as proof of qualifications.
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 Failure to complete this application and answer all questions truthfully may result in any offer of employment being withdrawn or appointment being terminated if any information is later found to be false.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. This application form and supporting documents will be held by the College. You may access it in accordance with the provisions of the Privacy Act 1993.

If you have any queries, please contact the person cited in the advertisement.

Application for Appointment

Please forward your application by email to sherron.harrison@staff.hagley.school.nz or by post to Sherron Harrison, Hagley College, PO Box 3084, Christchurch 8140

A. **Position applied for:** _____

B. **Personal Details:**

Family name: _____

Given names: _____

Preferred name: _____

Full postal address: _____

Email address: _____

Contact phone #: _____ Cellphone: _____

Previous family name, if used in teaching: _____

Are you a New Zealand citizen/resident* * Please ✓ as applicable

Or do you hold a Work Visa/Permit* * Relevant documents must be sighted

C. **Status:** (please tick appropriate box)

Registered teacher Teacher registration No: _____ Expiry Date _____

Provisionally registered Teacher registration No: _____ Expiry Date _____

Not registered, but have applied for full registration

Not registered

D. Present Position Held:

Position: _____

Organisation: _____

Date Appointed: _____

Nature of present position (tick appropriate boxes)

Permanent

Part-time

Fixed term

Full-time

Other: (specify) _____

If not teaching, state present occupation: _____

E. Referees:

Please provide the names of three people who could act as a referee for you. These 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.

Name	Postal Address & Email	Contact Numbers	Relationship / Position

F. Declaration

- a. Please describe any injury or illness, or other known conditions you have or have had that may affect your ability to effectively carry out the duties and responsibilities of the position.

- (1) Please indicate if you have received your COVID-19 vaccination – Public Health Order from NZ Government mandates that all education workers, paid or volunteer, of this College be fully vaccinated before commencing employment. If your application is successful, we will require proof of vaccination.

- First dose of vaccination Second dose of vaccination
 Booster

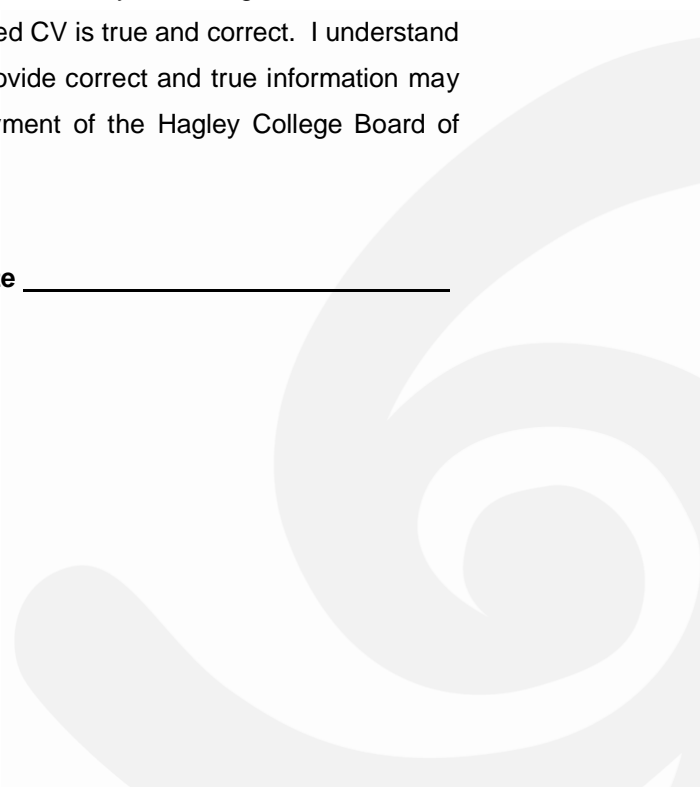
- b. Have you ever been convicted of any offence against the law (apart from minor traffic convictions) or otherwise know of any reason you should not be employed to work in the school environment? **YES / NO**
- c. Have you ever received diversion or otherwise know of any reason you should not be employed to work in the school environment? **YES / NO**
- d. Do you have any charges pending? **YES / NO**

If you answered **YES** to question (b), (c) or (d), you will be asked to provide a copy of relevant court records and asked to comment further.

- e. I solemnly and sincerely declare that to the best of my knowledge and belief, the information given in this application and attached CV is true and correct. I understand that this may be verified and that failure to provide correct and true information may make me liable to dismissal from the employment of the Hagley College Board of Trustees.

Signature _____

Date _____



G. Confidential Enquiries

I give the Hagley College Board of Trustees permission to seek information about my employment and personal background. I understand that this information will be treated in complete confidence, and only used for staff selection purposes. I understand that the Board or a nominated representative may approach persons other than the referees I have supplied, to gather information related to my suitability for appointment to this position. This may include approaching the Education Council or organisations identified in my Curriculum Vitae.

Signature _____

Date _____