RĀWHITI SCHOOL APPLICATION FORM

Please post or email to: The Principal

Rāwhiti School 150 Leaver Terrace Christchurch 8083

principal@rawhiti.school.nz

Position applied for: Fixed Term Scale A Bilingual Unit (Level 2)

PERSONAL DETAILS								
	Surname							
	Given names							
Pre	ferred name							
	Address							
	Date of birth					-		
Co	ntact details	Н	OME			WORK		
		МО	BILE			EMAIL		
Certificated Teac	her Status	√	Re	gistration No.				Expiry date
Certificated teacher	-							
Provisionally certific	cated							
Not certificated								
Present Teachin	g Position							
School								
Date appointed								
Type of appointmen	nt							
Can we contact your principal ab		out th	is po	osition?		YES	NO	
		Тур	oe of	qualification		Date received	Received	from
Educational								
Qualifications								

	Details of Training and Service Please include details of your work history for the last 5 years.							
SCHOOL	POSITION		DATES	CLASS LEVEL				
Please ind	icate any breaks in service and gi	ve reasons, e.g. overs	seas travel:					
DATES	REASON FOR BREAK							
Total certi	ficated service							
А	In permanent positions	years		months				
В	In relieving positions	years		months				
	nal Development ide a summary of recent professiona	ıl learning and developı	ment.					

I certify that the information given in this application is, to the best of my knowledge, true and correct. I understand that the claims made in my application may be checked. I understand that if I have supplied incorrect or misleading information, or have omitted any important information, I may be disqualified from appointment, or if appointed, may be dismissed.

2	I am currently registered to teach in New Zealand.	YES	NO	
---	--	-----	----	--

3	In accor	dance with the Privacy Act, I authorise the board of trustees to: Obtain further information from the referees listed in this application, and I consent to the referees disclosing such information to the board Obtain information in relation to my application from persons not listed as referees, and I consent to these persons disclosing pertinent information to the board.	YES	NO
	•	Contact the Education Council.		

STUDENT SAFETY

[Cross out the statement that doesn't apply to you]

- I have never been the subject of a complaint about the safety of a student.
- I have been the subject of a complaint about the safety of a student. Please give dates and details:

OFFENCES AGAINST THE LAW

5

[Cross out the statements that don't apply to you]

- I have never been convicted of an offence against the law (excluding minor traffic convictions).
- I have no pending charges of an offence against the law.
- I have been convicted of an offence against the law. *Please give dates and details:*
- I have pending charges of an offence against the law. *Please give dates and details:*

6 I know of no reason why I would not be suitable to work with children or young people.					
	Applicant's signature		Date		

REFEREES

Please provide the names and contact details of three referees below. Referees' reports are confidential to the board. Referees will only be contacted for candidates who are short-listed. At ;east one of your referees must be able to attest to your level of Te Reo Maori.

REFEREE'S DETAILS				
Full name				
Position				
Relationship to the applicant				
Contact details	PRIVATE	,	WORK	
Contact details	MOBILE		EMAIL	

REFEREE'S DETAILS				
Full name				
Position				
Relationship to the applicant				
Contact details	PRIVATE		WORK	
Contact details	MOBILE		EMAIL	

REFEREE'S DETAILS				
Full name				
Position				
Relationship to the applicant				
Contact details	PRIVATE		WORK	
Contact details	MOBILE		EMAIL	