

Application for Employment

Complete all sections of this application form even though they may be duplicated in your Curriculum Vitae. Please email your application, covering letter and curriculum vitae to principal@chilton.school.nz or post to:

The Principal Chilton Saint James School PO Box 30090 Lower Hutt 5010

POSITION APPL	LIED FO	OR .								
PERSONAL DE	TAILS									
Title (please circle one)				Mr	Mrs	Miss	Ms	Dr		
Surna			First Names				Preferred Name			
Postal Address										
	Home				Work					
Contact Details	Phone	•			Phone					
Contact Details	Fax				Mobile					
Email										
						_				
Date of Birth (optional)					Nationalit y					
Are you a New Ze	aland F	Resident?	(please c	ircle one)		,	Yes		No	
If no, do you have	e a New	Zealand	Work Peri	mit? (pleas	se circle one)	,	Yes		No	
PRESENT EMPLOYM	ENT									
Organisation Nan	ne									
Position										
Date Commenced	k									

QUALIFICATIONS						
Qualification and Experience			Institution	Date Conferred		
PREVIOUS EMPLOYMENT						
Organisation	or part tir	ne and includ	de number of hours per week i Specifications	Part time Part Time Hours/	Period E	mployed
				Week	Start	Finish
Additional Experience	o Polovar	at to the Bos	ition (this may include Profe	esional F	levelonme	nt)
Additional Experience	e ixeleval	it to the Fos	mion (mis may include From	essional L	evelopille	iii,
Personal Interests an	d Commi	unity Involve	ement			

HEALTH STA	ATEMENT						
(please c	ircle one)	Excellent	Good	Average	Poor		
	Please describe any injury or illness you have had that may affect your ability to effectively carry out the duties and responsibilities of the position.						
Do you have any other known condition that may affect your ability to carry out the duties and responsibilities outlined in the job description? If yes, please provide details.							
I understand that any false information given in relation to my medical history may result in my loss of entitlement for any compensation from ACC or paid sick leave entitlement.							
Signed			Date				
DIGG! GG!ID!							

DISCLOSURE OF CONVICTIONS

Have you ever been convicted of any offence against the law (apart from minor traffic infringements) and know of any reason why you should not be employed to work in a school environment?

No

(Please circle one) Yes

If yes, to the above question, please provide details below or on a separate sheet.

OTHER RELEVANT INFORMATION

If there is any other relevant information that would assist the Principal in making her decision about your suitability for this position, please provide details below.

PRIVACY STATEMENT TO APPLICANTS FROM THE PRINCIPAL AND BOARD OF TRUSTEES

The information provided or to be provided to the Principal in regard to this application will only be used for the purpose of determining the applicant's suitability to fill the vacancy. Only the Principal or representative will have access to the information. The curriculum vitae of the successful applicant will be kept on file along with their application. All referee reports along with other information gathered on applicants during the process will be destroyed.

REFEREES			
		of at least two referees what tacted without prior notifica	no may be contacted to support your
1. Referee's	rees will flot be corr	tacted without phot hounca	иот то те аррисанту
Name			
Postal Address			
Email Address			
Tolombono	Home	Work	Mobile
Telephone Contact	Home	WOIK	WODILE
Relationship to A	Applicant		
Relationship to 7	Аррисант		
2. Referee's			
Name			
Postal Address			
Email Address			
Telephone	Home	Work	Mobile
Contact	Tiome	WOIR	WODITE
Polotionship to	Annlicant		
Relationship to A	Тррпост		
3. Referee's			
3. Referee's			
3. Referee's Name			
3. Referee's Name Postal Address Email Address		Work	Mohile
3. Referee's Name Postal Address	Home	Work	Mobile
3. Referee's Name Postal Address Email Address Telephone Contact	Home	Work	Mobile
3. Referee's Name Postal Address Email Address Telephone	Home	Work	Mobile
3. Referee's Name Postal Address Email Address Telephone Contact	Home	Work	Mobile
3. Referee's Name Postal Address Email Address Telephone Contact Relationship to A DECLARATION Please read and s	Home Applicant	atement.	
3. Referee's Name Postal Address Email Address Telephone Contact Relationship to A DECLARATION Please read and s In accordance with enquiries from the	Home Applicant sign the following state the Privacy Act 19 areferees listed in the privacy in	atement. 993, I give consent for the F	Mobile Principal or her representative to make asent to the referees making such
3. Referee's Name Postal Address Email Address Telephone Contact Relationship to A DECLARATION Please read and s In accordance with enquiries from the information available.	Home Applicant sign the following state the Privacy Act 19 areferees listed in the privacy in	atement. 993, I give consent for the F his application and give cor	Principal or her representative to make
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