

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

POSITION APPLIED FOR

PERSONAL DETAILS		
Title (please circle one)		Mr Mrs Miss Ms Dr
Surname	First Names	Preferred Name

Postal Address	

Contact Details	Home Phone		Work Phone	
	Fax		Mobile	
Email				

Date of Birth (optional)		Nationality	
Are you a New Zealand Resident? (please circle one)		Yes	No
If no, do you have a New Zealand Work Permit? (please circle one)		Yes	No

Teacher Registration Status

Please tick the appropriate box

- Fully Registered Teacher
- Provisionally Registered Teacher
- Registered Subject to Confirmation
- Applying for Registration

✓

Practising Certificate Number		Expiry Date	
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TEACHING QUALIFICATIONS			
Qualification	Institution	Teaching subjects	Date Conferred

TERTIARY QUALIFICATIONS			
Qualification	Subjects Studied/Level	Institution	Date Conferred

PRESENT EMPLOYMENT			
Organisation Name			
Position		Salary Step	
Date Commenced		No. Management Units	
Subjects/Levels			

PREVIOUS EMPLOYMENT HISTORY					
Please state if full time or part time and include number of hours per week if part time.					
Position	School	Subjects Taught/Level	Part Time Hours/Week	Period Employed	
				Start	Finish

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.			

REFEREES			
<i>Please supply the names and details of three referees who may be contacted to support your application.</i>			
1. Referee's Name			
Postal Address			
Email Address			
Telephone Contact	Home	Work	Mobile
Relationship to Applicant			

2. Referee's Name			
Postal Address			
Email Address			
Telephone Contact	Home	Work	Mobile
Relationship to Applicant			

3. Referee's Name			
Postal Address			
Email Address			
Telephone Contact	Home	Work	Mobile
Relationship to Applicant			

DECLARATION

Please read and sign the following statement.

In accordance with the Privacy Act 1993, I give consent for the Principal or her representative to make enquiries from the referees listed in this application and give consent to the referees making such information available.

Signed

Date

CONFIRMATION

Please read and sign the following statement.

I declare that to the best of my knowledge the answers in this application and the information provided in my curriculum vitae are correct. I understand that if any false or misleading information is given, or any information suppressed, I will not be employed or if I am employed, my employment may be terminated.

Signed

Date

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.