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| ***Support Staff******Application Form*** |

**Mission Heights Junior College**

**In addition to completion of this application form, please provide a current curriculum vitae and covering letter.**

Applications must be submitted digitally by email to plyness@mhjc.school.nz

Application details

Personal details

|  |  |
| --- | --- |
| Last name: |  |
| First name: |  |
| Birth name/other name(s) known by: |  |
| Please tick | Male |  | Female |  |
| Phone number (work): |  |
| Phone number (home): |  |
| Phone number (mobile): |  |
| Physical address: (how long at this address) |  |
|  |
|  |  |
| Email address: |   |

Qualifications

|  |
| --- |
| **Qualifications gained**  |
| **Qualification** | **date obtained (year)** | **name of institution** |
|  |  |  |
|  |  |  |
|  |  |  |

Past employment

Please start with your most recent employment and work backwards and include all of your previous employment record. Note: This section should be completed regardless of whether it is detailed in your CV.

| **Start date** | **End date** | **Employer contact and phone #** | **Position Held** | **Reason for leaving** |
| --- | --- | --- | --- | --- |
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|  |  |  |  |  |

 Reference checking

|  |  |  |
| --- | --- | --- |
|  | **yes** | **no** |
| Do you consent to us contacting your present or previous employers for the purpose of reference checking? |  |  |
| If no, no approach will be made to your current employer until you agree. Any future offer will be conditional upon receipt of satisfactory references. |

Please complete the table below. We require a minimum of three Referees. At least two of these people should preferably be individuals you have reported to in previous roles.

|  |  |
| --- | --- |
|  | **Referee one** |
| Name: |  |
| Referee's Position: |  |
| Organisation: |  |
| Contact Details (phone and email): |  |
| Relationship to you: |  |

|  |  |
| --- | --- |
|  | **Referee two** |
| Name: |  |
| Referee's Position: |  |
| Organisation: |  |
| Contact Details (phone and email): |  |
| Relationship to you: |  |

|  |  |
| --- | --- |
|  | **Referee three** |
| Name: |  |
| Referee's Position: |  |
| Organisation: |  |
| Contact Details (phone and email): |  |
| Relationship to you: |  |

Health

|  |  |  |
| --- | --- | --- |
|  | **yes** | **no** |
| Do you have any illness, injury, condition or health problem that may affect your ability to perform in this position? |  |  |
| If yes, please provide details. |
|  |
| Please outline any special services or facilities you may need to assist you to perform the position. |
|  |

Right to work/criminal conviction

|  |  |  |
| --- | --- | --- |
|  | **yes** | **no** |
| You need to be a New Zealand Citizen have permanent NZ residency or a current NZ work visa, Do you meet these requirements?(You may be required to produce evidence) |  |  |
|  |  |  |  |  |  |
|  | **yes** | **no** |
| Have you ever been convicted of a criminal offence*[[1]](#footnote-1)* or are you awaiting the hearing of any criminal charges? (if Yes, please give details)Have you had any dealings with the Police? (If Yes, please give details) |  |  |
| We are required by legislation to police check all employees. Any appointment is subject to a satisfactory police check. Do you consent to the school conducting a police check. | **Yes** | **No** |

1Under the Criminal Records (Clean Slate) Act 2004, you do not need to declare your New Zealand conviction if **all** the following apply:

 (a) It has been 7 or more years since your most recent conviction and you have

not re-offended; and

 (b) You have never had a custodial sentence imposed upon you (including detention at home, in hospital or at any secure facility); and

 (c) You have paid any fines/costs/compensation/reparation.

 Regardless of how long ago you were convicted, you are not eligible to conceal your conviction if:

you have ever been convicted of a sexual offence; or

you have ever been disqualified from holding a driver licence for repeat offending involving alcohol/drugs; or

the conviction was from overseas;

General

|  |  |
| --- | --- |
|  |  |
| If you are the successful applicant, please confirm when you would be able to start |
|  |  |  |  |
|  | **Yes** | **No** |
| **Drivers Licence** |  |  |  |  |  |  |
| Do you have a current New Zealand Drivers Licence? |  |  |
| Have you ever been disqualified? |  |  |
| If Yes, please give details: |
|  |
|  |
| Licence Number: |  |

Declaration

I declare that the information I have submitted with this form and in connection with my application for potential employment is true and correct. I understand that if any false information is given, or material suppressed, I may not be accepted or if I am employed, my employment may be immediately terminated.

I irrevocably authorise you to contact any or all of my previous and current employers, including any employers that I have not nominated on this application. Any information supplied is supplied in confidence as evaluative material and will not be disclosed to me.

This position is subject to police vetting and that my employment may be terminated if information is obtained through this process which affects my suitability for employment.

The information on this form is sought for the purpose of assessing your suitability for employment with **Mission Heights Junior College,** and will be retained, used and disclosed only in accordance with the Privacy Act 1993.

I HAVE READ AND FULLY UNDERSTAND THIS DECLARATION:

Signed :

Dated :

1. [↑](#footnote-ref-1)