

**Teaching Appointment Application Form -- Mission Heights Junior College**

**In addition to completion of this application form, please provide a current curriculum vitae, covering letter and written references. Applications must be submitted digitally** to: Alanna Young, Principal's P.A. at Mission Heights Junior College, ayoung@mhjc.school.nz.

|  |
| --- |
| **Personal details** |
| Last name: |  |
| First name: |  |
| Birth name / other name(s) known by: |  |
| Gender (please highlight): | Male Female |
| Phone number (work): |  |
| Phone number (home):  |  |
| Phone number (mobile): |  |
| Address: |  |
|  |  |
| Email address:  |  |
| Please indicate earliest possible starting date:  |  |

|  |
| --- |
| **Registration Details** |
| NZ Teacher Registration | Number: | Expiry Date: |
| Registration Status (Full, provisional, conditional, with conditions) |  |  |
| Please indicate if you are a first or second year teacher or if not applicable  |  |  |

|  |
| --- |
| **Qualifications / Current Studies** |
| Degree / 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 | Employing organisation, contact name and phone number | Your position in this organisation | Reason for leaving |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |
| --- |
| **Professional Memberships** |
| Are you a member of any professional institutions? If yes, please list below:  | Yes No |

|  |
| --- |
| **Reference Checking** |
| Do you consent to us contacting your present or previous employers for the purpose of reference checking? (Please highlight) 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. | Yes No |

|  |
| --- |
| **References:**Please complete the table below. We require a minimum of three confidential referees. At least two of these people should preferably be individuals you have worked with in your present or previous roles. |
|  | Referee #1  | Referee #2 | Referee #3 |
| Name: |  |  |  |
| Title:  |  |  |  |
| School / organisation: |  |  |  |
| Contact details (phone and email): |  |  |  |
| Relationship to you: |  |  |  |

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

|  |
| --- |
| **Right to work / criminal conviction** |
| Do you have a legal right to work in New Zealand?  | Yes No |
| Is this because you are a New Zealand citizen or permanent NZ resident?If not please explain (You may be required to produce evidence) | Yes No |
| Have you ever been convicted of a criminal offence or are you awaiting the hearing of any criminal charges?If yes, please give details. | Yes No |
| Have you had any dealings with the police?If yes, please give details. | Yes No |
| 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 |

1. Under the Criminal Records (Clean Slate) Act 2004, you do not need to declare your NZ conviction if ALL of 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 hong 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 drivers licence for repeat offending involving alcohol/drugs; or the convection was from overseas.

|  |
| --- |
| **Drivers Licence**  |
| Do you have a current New Zealand Drivers Licence?Drivers Licence Number:  | Yes No |
| Have you ever been disqualified?If yes, please give the details.  | Yes No |
| Have you ever been convicted of a criminal offence or are you awaiting the hearing of any criminal charges?If yes, please give details. | Yes No |

|  |
| --- |
| **Application Questions** |
| **What, if any, other curriculum areas are you able to teach.** |  |
| **What appeals to you particularly about this position?** |  |
| **Discuss briefly your educational philosophy in the context of a** **Junior College (Year 7-10).** |  |
| **At MHJC we are a 21st Century school with a vision that often requires new learning and an openness to change for our teachers.** **Please comment on your preparedness for such challenges. You may wish to provide examples of educational innovation or initiatives you have been involved in.** |  |

**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:**