

Application for Appointment

IMPORTANT NOTES FOR APPLICANTS

Thank you for applying for a position within our School.

- 1. Please fully complete this form personally. Read it through first then answer all questions and make sure you sign and date where indicated on the last page.
- 2. Attach a curriculum vitae (CV) containing any additional information. If you include written references, please note that we may contact the writers of these references.
- 3. Attach copies of qualification certificates only. If successful in your application, you will be required to provide originals as proof of qualifications.
- 4. If you are selected for an interview, you may bring whanau/support people at your own expense. Please advise Tiere Matenga Riki triki@southerncross.school.nz if this is your intention.
- 5. Failure to complete this application and answer all questions truthfully may result in any offer of employment being withdrawn or appointment being terminated if any information is later found to be false.
- 6. Shortlisted applicants will be asked to give consent to a police vet.
- 7. This application form and supporting documents will be held by the Campus. You may access it in accordance with the provisions of the Privacy Act 1993.

If you have any queries, please contact Tiere Matenga Riki triki@southerncross.school.nz

OFFICE USE ONLY: This page must be retained on file as part of the application; it must not be removed or destroyed.



APPLICATION FOR APPOINTMENT

Position applied for:	Location:		Vacancy/Reference No:
	J.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	
Tick One			
Mr ☐ Mrs ☐ Ms	☐ Miss ☐		
			
Or other preferred title:			
Surname / Family Name	Firet Nam	es (in full)	
Surname / Family Name	T IISt Nam	es (III Tuli)	
Full Postal Address			
Full Postal Address			
Cantact Talambana Numban			
Contact Telephone Number Private:	Business:		Mobile:
		······	
Please tick the appropriate boxes:			
Are you a New Zealand citizen?		☐ Yes	□ No
	or.		
If not, do you have residence status, A current work permit?	Ol	☐ Yes☐ Yes	No No
Have you ever had a criminal convict	ion?	Yes	No
If "Yes" please detail:			
Have you ever been convicted of a di		temporary [Yes No
or permanent loss of licence, or impri	sonment?		
If "Yes" please detail:			
		······································	
Are you awaiting sentencing / current	ly have charges pending?		Yes No
If "Yes", please provide details:			



In addition to other information provided are there any other factors that we should know to assess your suitability for appointment and ability to do the job?	☐ Yes ☐ No
If "Yes" please detail:	
Have you had any injury or medical condition caused by gradual process, disease or infection, such as occupational overuse syndrome, stress or repetitive strain injuries, which the tasks of this job may aggravate or contribute to?	☐ Yes ☐ No
If "Yes" please detail:	
Do you have a medical condition that could prevent you from performing in this position to an acceptable level?"	☐ Yes ☐ No
Do you have a current driver's licence?	☐ Yes ☐ No
What class of licence held?	
Have discipline procedures ever been commenced against you in any of Your previous employment positions?	☐ Yes ☐ No
If "Yes" please detail:	
TWO forms of photo identification have been supplied to SCC (please list below what these two forms of ID are):	☐ Yes ☐ No
1	
2	
Have you had or are you involved in any school discipline issues?	☐ Yes ☐ No
If 'Yes' please detail	
Are you part of a current Police investigation?	☐ Yes ☐ No
If 'Yes' please details	



Educational Qualification	is:		
Please state your last se	econdary level qualification:		-
Please state your tertiar	y level qualification/s:		
Please state any other q	ualifications that relate to th	ne position:	
Employment History Please outline your most re	ecent employment history, t	peginning with current	or latest employment.
Period Worked	Employer's Name	Position Held	Reason for Leaving
these should be able to at	of three people who could test to your work performan se recorded below, please	ice. If you have includ	ded written references
Name	Address	Telephone	Relationship (e.g. employer/principal)
Do you agree to these re	 ferences being asked to no	 minate other persons	│ Yes ☐ No
who might assist in asses	ssing your application? If Y		
we may contact these pe	rsons.		



The position you have applied for requires specific knowledge, skills, attributes and personal characteristics. Please outline below how you meet each of these attributes and abilities. Even though you are attaching a C.V. please fill this out in full. The contact person cited in the advertisement can assist with any questions you might have.

Knowledge, skills, attributes and personal characteristics	Past roles in which you have demonstrated this knowledge, skills, attributes and personal characteristics	What did you do which demonstrated this?

I certify that the information I have supplied in this application is true and correct. 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 liable to be dismissed. I confirm the terms of the Privacy Act 1993 that I have authorised access to referees.

Signature Employee		Date	
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REFEREE'S REPORT (Confidential to Southern Cross Campus)

Name of Applicant:
Referee's Name:
Home Phone: Mobile Phone:
Work Phone: Work Extension:
Email Address:
What is your relationship to the applicant?
(b) How long have you known them?
(c) What opportunities have you had recently to see them at work?
2. What are the main reasons that they will stand out as being an excellent teacher?
3. What is their Achilles' heel? Weaknesses? Or, areas needing development?
4. If you were in our position, would you appointment this Applicant as a teacher without eservation?
5. Any other comments that will help in the consideration of this Applicant?

Please return directly to:

The Executive Assistant Southern Cross Campus 237 Buckland Road Mangere Auckland 2024

Email: triki@southerncross.school.nz