**Raphael House Rudolf Steiner Area School**

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

**27 Matuhi Street, Tirohanga, Lower Hutt 5010**

**Phone: 04 569 5161**

**Email:** [**vacancies@raphaelhouse.school.nz**](mailto:vacancies@raphaelhouse.school.nz)**, Attention: The Principal**

Application for Appointment

**IMPORTANT NOTES FOR APPLICANTS**

Thank you for applying for a position with our school. Please ensure you have a copy of the job description and person specifications before completing this application.

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 the references.
3. Copies only of qualification certificates should be attached. 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 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 Failure to complete this application and answer all questions truthfully may result in any offer of employment being withdrawn or appointment being terminated if any information is later found to be false.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. It is a requirement in the Education Sector for all employees to be vetted.
7. In terms of a Criminal Conviction, the Criminal Records (Clean Slate) Act 2004 provides certain convictions do not have to be disclosed providing:

* You have not committed any offence within 7 (consecutive) years of being sentenced for the offence **and**
* You did not serve a custodial sentence at any time (this would exclude serious offences such as murder, manslaughter, rape and causing serious bodily harm) **and**
* The offence was not a specified offence (specified offences are in the main sexual in nature) **and**
* You have paid any fine or costs

Custodial sentences include a sentence of preventive detention and corrective training. Non-custodial sentences include fines, reparation orders, community-based sentences and suspended sentences. Please note that you are not obliged to disclose convictions if you are an eligible individual but can do so if you wish. If you are uncertain as to whether you are eligible contact the Ministry of Justice.

1. This application form and supporting documents will be held by the school. You may access it in accordance with the provisions of the Privacy Act 1993.

If you have any queries, please contact the person cited in the advertisement.

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| **APPLICATION FOR APPOINTMENT** |

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| **Position Applied For** |  |
| Click here to enter text. | Raphael House Rudolf Steiner Area School |

**Please Select One**

Please Select.

Or other preferred title: Click here to enter text.

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| --- | --- |
| **Surname / Family Name** | **First Names (in full)** |
| Click here to enter text. | Click here to enter text. |

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| **Full Postal and Email Address** |
| Click here to enter text.  Email: Click here to enter text. |

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| **Contact Telephone** | |
| Home:Click here to enter text.  Mobile:Click here to enter text. | Work:Click here to enter text. |

| **Please tick appropriate boxes** | **Yes ✓** | **No ✓** |
| --- | --- | --- |
| Are you a New Zealand Citizen? |  |  |
| If not, do you have residence status, or |  |  |
| A current work permit? |  |  |
| Have you ever had a criminal conviction?  *(Convictions that fall under the clean slate scheme do not have to be disclosed.)*  If “Yes” please detail: |  |  |
| Have you ever received a police diversion for an offence?  If “Yes” please detail: |  |  |
| Have you been convicted of a driving offence which resulted in temporary or permanent loss of licence, or imprisonment?  If “Yes” please detail: |  |  |
| Are you awaiting sentencing / currently have charges pending?  If “Yes” please state the nature of the convictions / cases pending: |  |  |
| Have you been the subject of any concerns involving student safety?  If “Yes” please detail: |  |  |
| 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?  If “Yes” please elaborate: |  |  |
| 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?  If “Yes” please detail: |  |  |
| Do you have a current NZ driver’s licence? |  |  |

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| **Please complete if applying for a Teaching position** | | | |
| **Registered Teacher Status** | **Registration No.** | | Click here to enter text. |
|  | **Expiry Date** | | Click here to enter a date. |
|  | | | |
| ***Please Indicate*** | **✓** |  | |
| Registered Teacher |  |  | |
| Provisionally Registered |  |  | |
| Not registered |  |  | |
| Limited Authority to Teach |  |  | |
| Beginning Teacher |  |  | |

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| **Present Teaching Position** | | |
| School you are teaching at | | Click here to enter text. |
| Date Appointed | | Click here to enter a date. |
| **✓** | ***Type of Appointment*** |  |
|  | Permanent |  |
|  | Full Time |  |
|  | Part Time |  |
|  | Relieving |  |

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| **Educational Qualifications** |
| Please state your last secondary level qualification:  Click here to enter text.  Please state your tertiary level qualification(s):  Click here to enter text.  Please state any other qualifications that relate to the position:  Click here to enter text.  Please state any qualifications specific to Waldorf Education:  Click here to enter text. |

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| **Employment History** | | | |
| Please outline most recent employment history, beginning with current or latest employment | | | |
| ***Period Worked*** | ***Employer’s Name*** | ***Position Held*** | ***Reason for Leaving*** |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
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| **Referees** | | | |
| Please provide the names of three people who could act as referees for you. At least one of these should be able to attest to your most recent work performance. **If you have included written references from people other than those recorded below, please note that we may contact the writers of these references.** | | | |
| ***Name*** | ***Contact Details (organisation and Address)*** | ***Phone***  ***(landline preferred)*** | ***Relationship (eg employer / principal)*** |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |

| **Authority to Approach Other Referees** | **Yes ✓** | **No ✓** |
| --- | --- | --- |
| I authorise the Board, or nominated representative, to approach persons other than the referees whose names I have supplies, to gather information related to my suitability for appointment to the position. |  |  |
| I authorise the Board, or nominated representative, permission to access any information held by the Teachers Council, including matters under investigation, to gather information related to my suitability for appointment to this position |  |  |

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| I certify that:   * The information I have supplied in this application is true and correct. * I confirm in terms of the Privacy Act 1993 that I have authorised access to referees. * I know of no reason why I could not be suitable to work with children / young people. * 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. |

Signature \_Click here to enter text.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_Click here to enter a date.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Note: if completing this electronically a hard copy (signed) must be provided.***