



# St Mary's College

## Application Form for Teachers

To: The Principal, St Mary's College

Date of application: .....

I wish to apply for the position of .....

1. Full name:

Mr/Mrs/Ms/Miss .....  
[Circle one] Last Name First Names

2. If you have taught under another name, please indicate here: .....

3. Postal address: .....

Home: ..... (mobile) .....

Work: ..... (email) .....

4. Date of Birth: .... / .... / ..... (optional) 5. Religion .....

Vehicle: Make and model .....

License plate: ..... License plate.....

5. Emergency contact & Medical information

Next of kin: Name ..... Relationship (Optional).....

Mobile number .....

6. Medical information

Hospital/Clinic preference .....

Physician's name .....

Phone number: .....

Allergies or any medical conditions the College should be aware of

.....

Phone: Home:.....

Mobile:.....

Email: .....

**7. Registration:**

I am/am not a currently registered teacher.

**Registration number** .....

**Expiry Date:** .....

**Category:** Full/Provisional/Subject to confirmation/LAT

*[Please circle one and Include a photocopy of current teacher registration card.]*

**8. Certificates, degrees, qualifications or equivalents and diplomas held:**

Degrees, certificates & diplomas	Date	Subjects/papers passed	Levels

**9. Which subjects are you able to teach? [include levels]**

.....

**10. Which extra - curricular activities can you actively support?**

.....

**11. What is your current position and the date of your appointment? State MUs [if applicable].**

.....

**12. Teacher training: College .....Year(s).....**

**13. Overseas Teacher. If you are an overseas trained teacher, do you have: [Circle one]**

A work permit      Permanent residence      Temporary visa & no work permit?

Other .....

14. Teaching experience: *[Please give details in date order of previous teaching experience and length of service. Include all positions of responsibility.]*

Position & MUs	School	Principal subjects taught & levels	Started	Finished

15. Please list the names, addresses, telephone contact numbers and **email address** of three referees. State the capacity in which they know you.

Name	Capacity	Email	Landline number	Mobile number

**16. Educational Qualifications:**

Please state your last secondary level qualification:

Please state your tertiary level qualification/s:

Please state any other qualifications that relate to the position:

**17. Legal Entitlement to Work in New Zealand**

- a. Are you a permanent resident of New Zealand – Yes/No
- b. If you are not a permanent resident of New Zealand, do you have a current Work Permit/Visa? Yes/No
- c. What is the Expiry Date of your work permit? \_\_\_\_\_ (Please provide paperwork)

**Declaration:**

Have you ever been convicted of an offence against the law apart from summary offences? Yes/ No

If **Yes**, please provide date and details of the offence. You may be asked to provide a copy of the relevant court records available from the Registrar of the court concerned.

In addition to other information provided are there any other factors, medical or otherwise, that we should know to assess your suitability for appointment and ability to do the job? Yes/No

If **Yes**, please elaborate.

Privacy Act 1993

**I agree to St Mary’s College or its agents approaching my referees and my present or previous employer for a statement of my abilities and my contribution to the school, in relation to this application. I agree that they may also contact other persons who may have personal information relevant to this application.**

**I acknowledge that if I am the successful applicant, my CV, associated documents and my referees reports will be retained in my file by the College.**

**The appointment will be subject to confirmation of all information through the provision of original documentation – that is birth certificates, teacher registration, baptismal certificate if Catholic, qualifications and transcripts, passport details/residency certificate if applicable.**

**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.**

Applicant’s signature: ..... Date:.....

I have attached the following: My CV

Teacher Registration card copy:

Other documents [*photocopies only*]