



**Newton Central School**

**Te Kura a Rito o Newton**

*"Celebrating difference, diversity and success"*

## Application

### Deputy Principal Enrichment / Mātauranga Māori

### Permanent Position

#### IMPORTANT INFORMATION FOR APPLICANTS

##### APPLICATION FOR EMPLOYMENT

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

1. Please fully complete this form personally. First, read it through, 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.
3. Copies only of qualification certificates should be attached. If successful in your application, you will be required to provide the originals as proof of qualifications.
4. If you are selected for an interview you may bring whānau/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 Failure to complete this application and answer all questions truthfully may result in any offer of employment being withdrawn or appointment being terminated, if any information is later found to be false.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. a) Applicants may not be employed as a children's worker if they have been convicted of a specified offence listed in [Schedule 2 of the Vulnerable Children Act 2014](#), unless they obtain an exemption. The Criminal Records (Clean Slate) Act 2004 will not apply to these specified offences and these offences will be included in your Police vetting results.  
b) The Clean Slate Act 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
  - you did not serve a custodial sentence<sup>1</sup> at any time
  - the offence was neither a [specified offence under the Clean Slate Act 2004](#) nor a [specified offence under the Vulnerable Children Act 2014](#)
  - you have paid any fines or costs

Please note that you are not obliged to disclose convictions if you meet the above conditions but can do so if you wish. If you are uncertain as to whether you are eligible contact the Ministry of Justice.

7. Shortlisted applicants being interviewed will need to provide originals of both a primary identity document (e.g. passport) and a secondary identity document (e.g. New Zealand driver license). A list of acceptable primary and secondary documents is available in the last sections of the [Vulnerable Children Regulations 2015](#).
8. This application form and supporting documents of shortlisted applicants will be held by the board for 6 months after the appointment. You may access these 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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<sup>1</sup>**Custodial sentence** means a sentence of imprisonment and includes corrective training, preventive detention, a sentence of imprisonment served by home detention, borstal training, detention centre training and any other sentence that requires the full-time detention of an individual. **Non-custodial sentence** includes, but is not limited to, a community-based sentence, a sentence of home detention, a sentence of a fine or reparation, a suspended sentence of imprisonment, and a specified order.

## Application for DP Mātauranga Māori – Te Akapūkāea & Te Ao Māori, Newton Central School

### Personal Details

Title (Please Tick)	Mr	Mrs	Ms	Miss
Surname/ Family Name				
First Names (in full, underline preferred)				
Birth Name (if applicable)				
Are you known by any other name(s)? (If yes, please provide detail)	<input type="checkbox"/> Yes		<input type="checkbox"/> No	
Full Postal Address				
Email Address				
Phone Number (Day)				
Phone Number (Evening)				
Do you hold a current practising certificate from the Education Council of Aotearoa New Zealand?	<input type="checkbox"/> Yes		<input type="checkbox"/> No	
Category:	Registration Number:	Expiry Date:		

### Educational Qualifications

Highest Secondary School Qualification		
Tertiary Qualifications		
Qualification	Date Awarded	Institution

### Employment History

Please list your work experience for the last five years beginning with your most recent position. Please explain any gaps in employment. If you were self-employed, give details. Attach additional sheets if necessary.

Start Date	End Date	Employer's Name (or reason for gap in Employment)	Position Held	Reason for Leaving

## Identity Verification, Criminal Record and Right to Work

Are you a New Zealand citizen?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
• If not, do you have residential status?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
• or a Current Work Permit	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever had a criminal conviction?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>If "Yes" please detail:</p>  <p><i>(A board may not employ or engage a children's worker who has been convicted of an offence specified in <a href="#">Schedule 2 of the Vulnerable Children Act 2014</a>. The Clean Slate Act does not apply to schedule 2 offences.)</i></p>		
Have you ever received a police diversion for an offence?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>If "Yes" please detail:</p>		
Have you ever been discharged without conviction for an offence?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>If "Yes" please detail:</p>		
Do you have a current New Zealand driver's licence?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of a driving offence which resulted in temporary or permanent loss of licence, or imprisonment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>If "Yes" please detail:</p>		
Are you awaiting sentencing, or do you have charges pending?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>If "Yes" please state, the nature of the conviction/cases pending:</p>		
In addition to other information provided are there any other factors that we should know to assess your suitability for appointment and your ability to do the job?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>If "Yes", please detail:</p>		
Have you ever been the subject of any concerns involving child safety?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>If "Yes" please detail:</p>		
Have you had any injury or medical condition caused by gradual process, disease or infection, such as occupational overuse syndrome which the tasks of this position may aggravate or contribute to?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>If "Yes" please detail:</p>		

## Referees

Please provide the names of three people who could act as referees for you. One of these should be your current or most recent employer. Please indicate which referee is your current/previous employer in the table below. If you have included written references from people other than those recorded below, please note that we may contact the writers of these references.

### Referees Details

<b>Full Name</b>		
<b>Organisation</b>		
<b>Position/</b>		
<b>Relationship</b>		
<b>Contact Details</b>	Mobile:	Email:

### Referees Details

<b>Full Name</b>		
<b>Organisation</b>		
<b>Position/</b>		
<b>Relationship</b>		
<b>Contact Details</b>	Mobile:	Email:

### Referees Details

<b>Full Name</b>		
<b>Organisation</b>		
<b>Position/</b>		
<b>Relationship</b>		
<b>Contact Details</b>	Mobile:	Email:

## Authority to approach other referees

I authorise the Board, or nominated representative, to approach persons other than the referees whose names I have supplied, to gather information related to my suitability for appointment to the position.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I authorise the Board, or nominated representative, permission to access any information held by the Education Council of Aotearoa New Zealand (EDUCANZ) or any other educational organisation, including information regarding matters under investigation, to gather information related to my suitability for appointment to the position.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

## Declaration

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 would 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:

Date:

**Note: An electronic signature is acceptable**