



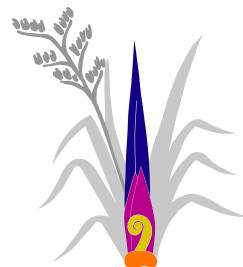
BLENHEIM SCHOOL

Te Kura o Waiharakeke

Teaching Position Application Form

Commences Term 1, 2025

Please post or email to: The Principal
11 Seymour Street
Blenheim 7201
Marlborough
principal@blenheim.school.nz



POSITION APPLIED FOR

AREA OF SCHOOL APPLYING FOR

- ☐ Fixed-term Scale A Teacher
☐ Permanent Scale A Teacher

- ☐ New Entrant
☐ Junior School

- ☐ Senior School
☐ Any area of the school

PERSONAL DETAILS

Surname

Given Names

Preferred Name

Address

Home Phone

Cell Phone

Work Phone

Email

CERTIFICATED TEACHER STATUS

✓

Registration Number

Expiry Date

Fully Registered

☐

Provisionally Registered

☐

Not Yet Registered

☐

MOST RECENT TEACHING POSITION

SCHOOL

DATE APPOINTED

TYPE of EMPLOYMENT

Can we contact the Principal of your current school about this position

YES

☐

NO

☐

EDUCATIONAL QUALIFICATIONS			
Institution Attended	Year	Qualifications Attained	Date Completed

TEACHING SERVICE				
<i>(List all Schools and positions from the most recent)</i>				
Start Date	End Date	Position Held	School/Employer	Reason for Leaving

Please indicate any breaks in service and give reasons. e.g. overseas travel:	
Date	Reason for Break

TOTAL TEACHING SERVICE				
In Permanent Position	Years:		Months:	
In Fixed-Term Position	Years:		Months:	
In Relieving Position	Years:		Months:	

REFEREES

(Note: at least one referee should be able to attest to your most recent work performance)

****Referee 1**

Full Name			
Position Held and Where			
Relationship to You			
Home Phone		Cell Phone	
Work Phone		Email	

****Referee 2**

Full Name			
Position Held and Where			
Relationship to You			
Home Phone		Cell Phone	
Work Phone		Email	

****Referee 3**

Full Name			
Position Held and Where			
Relationship to You			
Home Phone		Cell Phone	
Work Phone		Email	

CONFIRMATION

I certify that the information given in this application is, to the best of my knowledge, true and correct. I understand that the claims made in my application may be checked. 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 dismissed.

☐ YES
☐ NO

I am legally entitled to work in New Zealand in the role applied for (i.e. as a New Zealand or Australian citizen/permanent resident or holder of a current and valid work visa or residence visa).

☐ YES
☐ NO

I am currently registered to teach in New Zealand.

☐ YES
☐ NO

In accordance with the Privacy Act 2020, I authorise the board of trustees to obtain further information from the referees listed in this application, and I consent to the referees disclosing such information to the board.	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you have any matters relating to yourself currently or previously before the Teachers Council?	<input type="checkbox"/> YES <input type="checkbox"/> NO

STUDENT SAFETY (Cross out the statements that do not apply to you.)

I have never been the subject of a complaint about the safety of a student.
I have been the subject of a complaint about the safety of a student. Please give dates and details:

OFFENCES AGAINST THE LAW (Cross out the statements that do not apply to you.)

I have never been convicted of an offence against the law (excluding minor traffic convictions).
I have no pending charges of an offence against the law.
I have been convicted of an offence against the law. Please give dates and details:
I have pending charges of an offence against the law. Please give dates and details:

OTHER INFORMATION

Do you have a current New Zealand driver's licence	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Have you had any injury or medical condition which the tasks of this job may aggravate or contribute to	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
I know of no reason why I would not be suitable to work with children or young people.	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>

<i>This Application is submitted with the understanding that any further information given is for the use of the employer and their authorised representatives who may at any time have access to this information. Furthermore, consent is given for members of the Blenheim School Appointment Committee or its advisor to make enquiries of my present or past employers or colleagues or any other person who may assist in establishing my suitability for the position of Teacher at this school including accessing any information used by the Teaching Council of Aotearoa New Zealand.</i>
APPLICANT'S SIGNATURE: _____ DATE: _____
PRIVACY ACT 2020 (To be signed by the Applicant)

Note: If completing this form electronically, a signed hard copy must be provided at interview
