

**TEACHER ASSISTANT POSITION**

**COMMENCING TERM 3, 2025**

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| Personal Details | |
| Surname: | Preferred Title: Dr / Mr / Mrs / Ms / Miss |
| First name: | |
| Contact Details | |
| Postal address: | |
| Email address: | |
| Home phone: | Work phone: |
| Mobile phone: | MoE No. |
| Current Position | |
| School name: | Location: |
| Position held: | Length of time position held: |
| Qualifications | Date Awarded |
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| **Physical and Emotional Wellbeing** |
| Do you have any medical conditions that may affect your ability to effectively carry out the functions and responsibilities of employment, or which may be aggravated or further contributed to, by the functions and responsibilities of employment? **Yes / No** |
| If you have answered yes to the above question, please specify health conditions/disabilities: |
| **Other relevant information:**  If there is any other relevant information that would assist the board in making its decision about your suitability to fill the vacancy, please outline this below. |



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| **Disclosure of Convictions Against the Law** |
| Have you ever been convicted of any offence against the law (apart from minor traffic convictions) in New Zealand or overseas? **Yes / No**  Do you have any criminal charges pending? **Yes / No** |
| If you have answered yes to either of the above questions, enclose a certified copy of the entry in the Criminal Record Book relating to the conviction(s), obtained from the Registrar of the Court concerned. The copy should be accompanied by any comments regarding the offence that you wish to make. Please provide details. |

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| 1. **Referee Information** | | | |
| Please provide referee contact details of at least two referees who know you in a work-related capacity and who may be asked to provide confidential statements to support your application. It is important that these referees can verify professional competencies relative to this position i.e. teaching, leadership, management, and communication skills. Please ensure the email addresses you provide for your referees are current and correct. | | | |
| **Referee One** | | | |
| Name: | | | |
| Position held: | | | |
| Name of organisation: | | | |
| Relationship to applicant: | | | |
| Daytime Phone: | Mobile: | | Email: |
| **Referee Two** | | | |
| Name: | | | |
| Position held: | | | |
| Name of organisation: | | | |
| Relationship to applicant: | | | |
| Daytime Phone: | Mobile: | Email: | |
| **Declaration:** Please sign below to show your agreement with the following statement.  *In accordance with the Privacy Act 1993, I give consent for the Board or its representatives to make enquiries from the referees listed in this application and give consent to the referees making such information available. Furthermore, I give consent for the Board or its representatives to make enquiries of past or current employers, colleagues, other education professional, or any other person who may be in a position to assist the board in determining my suitability to fill the vacancy and I give consent to those people to disclose such information.*  Signed: Date: | | | |

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| 1. **Proof of Identity** | | | |
| To assist the school to meet the requirements for proof of identity, **applicants who are short-listed** are required to present two forms of identification from the list in the table below (one document from Category A and one document from Category B). At least one of the acceptable forms of identification must be photographic. The documents must be current, not expired, and issued by an authorised agency. If applicable, where names or other identity information on either identification documents (Category A and Category B) differ, please provide acceptable evidence (e.g. a marriage certificate or a statutory declaration). | | | |
| **Category A** | **Tick** | **Category B** | **Tick** |
| New Zealand passport |  | New Zealand Driver License |  |
| NZ Certificate of Identity issued under the Passports Act 1992 to non-New Zealand citizens who cannot obtain a passport from their country of origin |  | 18+ card |  |
| New Zealand Certificate of Identity (issued to people with refugee status) |  | Community Services Card |  |
| New Zealand Refugee Travel Document |  | Super Gold Card |  |
| Emergency Travel Document |  | Inland Revenue Number |  |
| New Zealand Firearms Licence |  | Electoral Roll Records |  |
| Overseas passport (with or without NZ Immigration visa/permit) |  | New Zealand issued utility bill, issued not more than six months earlier) |  |
| New Zealand full birth certificate (issued on or after 1998) |  |  |  |
| New Zealand Citizenship Certificate |  |  |  |





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| **Declaration and Authorisation** | |
| *(tick box)* | I declare that the information supplied by me is given voluntarily and is true, accurate and complete in all respects. I acknowledge that I will not hold Te Parito Kōwhai Russley School or the Board responsible for any omission or misstatements that I have made in the information provided. |
|  | * I understand that all information provided about me to you, including my application form, Curriculum Vitae, references and any assessments will be held by the Te Parito Kōwhai Russley School Board to be used for the purpose of evaluating my qualifications, experience and suitability for employment at Te Parito Kōwhai Russley School. |
|  | * I understand that if I withhold relevant information or supply false or misleading information about myself, my application may not be further considered. I also understand that my employment may be terminated if, after investigation, my employer discovers that any information which I have provided is false or misleading. |
|  | * I understand that I am entitled to have access to relevant information retained by the Te Parito Kōwhai Russley School Board (except for any exemption provided under the Privacy Act 1993 such as evaluative material) and to request correction of the information and/or request that there be attached to the information a statement relating to the fact that I have requested a correction. |
|  | * I consent to the Appointment Committee personnel making such enquiries with such organisations including but not limited to inquiries with all former employers, or organisations that might hold information relevant to my employment, my suitability to manage and any other information that my prospective employer deems necessary to obtain. |
| **Signature: Date:** | |



