

Morningside School

Empowering Learning
Whakamana Akoranga



POSITION APPLIED FOR:

PERSONAL DETAILS:

TITLE MISS / MS / MRS / MR

NAME

ADDRESS

ETHNIC IDENTITY

DATE OF BIRTH / /

CONTACT PHONE NUMBERS: HOME (0)

WORK (0)

MOBILE FAX (0)

EMAIL

REGISTRATION No:

EXPIRY DATE / /

PRESENT EMPLOYMENT:

NAME OF PRESENT EMPLOYER

ADDRESS

CONTACT PHONE NUMBERS: WORK (0)

OTHER (0)

POSITION HELD

DATE COMMENCED

REFEREES:

1: NAME

ADDRESS

CONTACT PHONE NUMBERS: WORK (0)

OTHER (0)

RELATIONSHIP TO APPLICANT

FAX (0)

2: NAME

ADDRESS

CONTACT PHONE NUMBERS: WORK (0)

OTHER (0)

RELATIONSHIP TO APPLICANT

FAX (0)

Morningside Road, Whangarei, New Zealand

Tel 09 438 2021 Fax 09 438 2071

Email admin@morningside.ac.nz

Web www.morningside.school.nz

TERTIARY EDUCATION QUALIFICATIONS:

INSTITUTION ATTENDED	YEAR	QUALIFICATIONS ATTAINED	DATE AWARDED

TEACHING SERVICE: (or Teaching Practice for recent College of Education Graduates)

POSITION	CLASS LEVEL	SALARY SCALE	SCHOOL	DATE FROM	DATE TO

TOTAL SERVICE

PRIVACY ACT 1993 (To be signed by the Applicant)

This Application is submitted on the understanding that any information given is for the use of the employer and their authorised representatives who may at any time have access to this information. I agree to the Board of Trustees (or its agents) approaching my referees for a written statement of my abilities in relation to this Application and, should it be necessary, to seek verbal clarification from the above referees on points that may need further explanation. Furthermore consent is given for members of the Board of Trustees 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 at this school.

APPLICANT'S SIGNATURE

DATE

DECLARATION:

HAVE YOU EVER BEEN CONVICTED OF AN OFFENCE AGAINST THE LAW? (apart from summary offences) NO YES
If YES, please provide date and details of offence/s on a separate sheet. Please note that you may be asked to provide a copy of the relevant court records available from the registrar of the court concerned.
I certify that I am registered (or provisionally registered) as a New Zealand Teacher. I solemnly and sincerely declare that to the best of my knowledge and belief the information given in this application and in my C.V. is correct.

APPLICANT'S SIGNATURE

DATE