



Heretaunga Free Kindergarten Association [Inc.]

KINDERGARTEN TEACHER/HEAD TEACHER APPLICATION FORM

Before completing this form please read it through carefully, taking notice also of information in the particular position description and Education Gazette. Late applications will not be accepted.

Instructions for completion of this application

- Applicants must complete this form and may use additional pages where necessary
- All supporting material accompanying this application must be on A4 paper. Do not send original documents and do not enclose material in clearlite folders or similar
- Use black pen and/or ensure that material is dark enough to photocopy
- When authorised by the applicant, attachments to this application form will be retained by the Association for a maximum of twelve months. Except when requesting the use of previously submitted attachments, all supporting material must be attached to the application form [refer Section 17.]

1. APPLICANT:

Full Name: _____
 Former Name: _____
 Address: _____

2. POSITION:

Vacancy No. _____
 Position: _____

 Teacher Registration No. _____
 Category: _____

Phone No. _____ Practising Certificate Expiry Date: / /
 Date of Birth: _____ Current First Aid Certificate Yes[] No[]
 Date Issued: / / (Please attach copy)

3. EARLY CHILDHOOD EDUCATION QUALIFICATION:

Where training undertaken _____
 Date ECE qualification or equivalency awarded _____

NB. If granted equivalency by the NZ Qualifications Authority, a copy of equivalency certificate must be enclosed.

4. EMPLOYMENT:

a) Current Employment:

Position	Kindergarten/Centre	Employer	From/Since

b) Past Paid Teaching Positions held:

Position	Kindergarten/Centre	Employer	From-To

	Mth/Yr - Mth/Yr
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Continue on separate sheet if necessary.	
c) Other relevant positions held:	
Position	From-To Mth/Yr - Mth/Yr
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Continue on separate sheet if necessary.	

5. LENGTH OF TEACHING SERVICE

a) New Graduate: Yes [] No []

b) Total number of years and months in permanent kindergarten positions:
 Senior Teacher _____ Head Teacher _____ Teacher _____

c) Number of years and months in permanent *other* early childhood positions:
 Supervisor _____ Assistant Supervisor _____ Teacher _____

d) Number of years and months in six weeks or longer continuous relieving:
 Kindergarten: Senior Teacher _____ Head Teacher _____ Teacher _____
 Childcare _____ Other _____

6. POST-SCHOOL QUALIFICATIONS:

7. OTHER QUALIFICATIONS [e.g. speech, music, etc.]:

8. CURRENT STUDY:

9. RELEVANT COURSES ATTENDED: [Use separate sheet if necessary]

10. SPECIFIC TEACHING SKILLS, STRENGTHS & INTERESTS:

11. RELEVANT EXPERIENCE OTHER THAN TEACHING IN AN EARLY CHILDHOOD CENTRE

12. OVERALL SUITABILITY FOR THE POSITION - in relation to your personal qualities and the extent to which you believe you would work well with the staff and the kindergarten/community concerned.

13. PREVIOUS CONVICTIONS:

Have you ever been convicted of any offence against the law [apart from minor traffic convictions]?

Yes [] No [] If 'yes' please provide brief details:

14. HEALTH:

Is there any reason why you may not be able to perform the essential tasks of the position?

Yes [] No [] If 'yes' please provide brief details:

15. REFEREES REPORTS:

You may arrange for the provision of up to three referees reports from persons able to provide comment on your professional work. Report forms are available from the Association. Forms should be forwarded to the referees with a stamped addressed envelope so that they may be posted directly to the Appointments Secretary. You are required to complete the first part of the form.

Subject to the approval of the referee/s, reports will be held on file for a maximum of twelve [12] months. At your request they may be used for future applications to this Association, within the twelve months.

Note that referees reports are confidential between the referee and the Association.

Referees reports to be used with application:

1. _____

2. _____

3. _____

Held on file?

Yes [] No []

Yes [] No []

Yes [] No []

16. PERSONAL INFORMATION DISCLOSURE AUTHORITY:

I, _____ hereby authorise the collection of information from any current or previous employer, training establishment, other agency or individual, for the purpose of determining my suitability for the kindergarten position for which I am applying, without further reference to me.

Please specify below any agency or individual to whom you do not wish an approach to be made in relation to this application:

NB. Your authority is required in accordance with the provisions of the Privacy Act 1993.

17. Please keep the attachments on file for twelve months -

Yes [] No []

Please note that incorrect or misleading information, or the omission of important information, may disqualify you from appointment, or, if appointed, make you liable for dismissal.

I certify that to the best of my knowledge all information provided in this application is true and correct.

Signature: _____

Date: _____