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**Principal Application Form**

Please fill in the application form and post together with your resume to:

Terri Johnstone

Catalyst for Change

P.O. Box 79089

Avonhead 8446

Alternatively, you may choose to email your application and resume to:

[terri@c4change.co.nz](mailto:terri@c4change.co.nz)

1. **Personal Details**

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| --- | --- | --- | --- |
| **Surname:** | | **Forename/s:** | |
| **Address:** | | | |
| **Home Phone:** | **Mobile:** | | |
| **Preferred email:** | | | |
| **Registration Number:** | | | **Expiry Date:** |
| **Practising Certificate Number:** | | | **MoE Employee #:** |

1. **Tertiary Education Completed & Study Currently Undertaken**

**(Please attach copies of official transcripts)**

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| **Degree, diploma**  **or certificate** | **Name and location of institution** | **Years of attendance** |
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| 1. **Relevant Professional Development** | | |
| **Development Undertaken** | **Name and location of institution** | **Years of attendance** |
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1. **Current Employment**

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| **Name and address of school or place of employment:** |
| **Period of Employment:** |
| **Position/s held:** |
| **Current Teacher Classification/salary step:** |

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| 1. **Employment History** | | |
| **Name of Employer** | **Position(s) held** | **Dates** |
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| 1. **Professional Associations** |
| **Advise the professional associations you belong to and your role in them.** |
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| 1. **Medical questionnaire** |
| 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 problems or disabilities below. |

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| 1. **Convictions Against the Law** | |
| Have you ever been convicted of any offence against the law (apart from minor traffic convictions)?  **Yes / No**  If you have answered yes to the above question, 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. Give full details.  Note: St Martins School may seek a police clearance from all short-listed applicants or preferred applicants, prior to confirmation of appointment. | |
| 1. **Referee Information** | |
| Please provide referee information. At least three of your referees must be known to you in a work-related capacity. Up to three referees may be contacted prior to short listing.  Please note that the Appointment Committee may wish to contact other people who are not on this list – please see the disclaimer. | |
| **REFEREE A.** | |
| **Name:** |  |
| **Phone:** |  |
| **Position held:** |  |
| **Organisation:** |  |
| **Relationship to Applicant:** |  |

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| **REFEREE B.** | |
| **Name:** |  |
| **Phone:** |  |
| **Position held:** |  |
| **Organisation:** |  |
| **Relationship to Applicant:** |  |

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| **REFEREE C.** | |
| **Name:** |  |
| **Phone:** |  |
| **Position held:** |  |
| **Organisation:** |  |
| **Relationship to Applicant:** |  |

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| **REFEREE D.** | |
| **Name:** |  |
| **Phone:** |  |
| **Position held:** |  |
| **Organisation:** |  |
| **Relationship to Applicant:** |  |

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| **REFEREE E.** | |
| **Name:** |  |
| **Phone:** |  |
| **Position held:** |  |
| **Organisation:** |  |
| **Relationship to Applicant:** |  |

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| 1. **Declaration and Authorisation** |
| 1. 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 St Martins School responsible for any omission or mis-statements that I have made in the information provided. 2. I understand that all information provided about me to you, including my application form, resume, references and any assessments will be held by St Martins School to be used for the purpose of evaluating my qualifications, experience and suitability for employment as Principal of St Martins School. 3. 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. 4. I understand that I am entitled to have access to relevant information retained by St Martins School (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. 5. I consent to the Chairperson and/or Appointment Committee personnel making such enquiries with such organisations including but not limited to inquiries with all former employers, Teacher Registration Board, and such other bodies or organisations which 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:** |