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## BOTANY DOWNS SCHOOL APPLICATION FOR APPOINTMENT

**TO: Vicki Parkins, Principal Botany Downs School**      **Email: vickip@botanydowns.school.nz**  
**Position Applying For: Deputy Principal**

### PERSONAL DETAILS

<b>Name:</b> _____ <b>Address:</b> _____ _____ _____ _____	<b>Home Ph:</b> (0 ) _____ <b>Work Ph:*</b> (0 ) _____ <b>Mobile Ph:</b> _____ <b>Fax:</b> (0 ) _____ <b>Email:</b> _____
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\*tick if you may be contacted at work   

### CITIZENSHIP / RIGHT TO WORK

Are you a New Zealand citizen?       **Yes** – go to next section       **No** – go to next question

Do you have Permanent Residence status?       **Yes** – go to next section       **No** – go to next question

Do you have a current Work Permit?       **Yes** – go to next section       **No** – you may not be eligible to be employed in New Zealand

### PRESENT EMPLOYMENT

<b>Present Employer:</b> _____ <b>Address:</b> _____ _____ <b>Position Held:</b> _____	<b>Work Ph:</b> (0 ) _____ <b>Mobile:</b> (0 ) _____ <b>Teacher Registration Number</b> _____ <b>Date Commenced:</b> _____
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### EMPLOYMENT HISTORY Teaching Service (list all schools and positions)

POSITION HELD	ORGANISATION	ADDRESS OF ORGANISATION	Date From	Date To


QUALIFICATIONS / CERTIFICATES (Including Teacher Registration and Training)			
Institution Attended	Year	Qualifications / Certificate Attained	Date Awarded

REFEREES			
①	Name:	_____	Home Ph: (0 ) _____
	Address:	_____	Work Ph: (0 ) _____
		_____	Mobile Ph: _____
		_____	Fax: (0 ) _____
	Relationship to Applicant:	_____	Email: _____
②	Name:	_____	Home Ph: (0 ) _____
	Address:	_____	Work Ph: (0 ) _____
		_____	Mobile Ph: _____
		_____	Fax: (0 ) _____
	Relationship to Applicant:	_____	Email: _____
③	Name:	_____	Home Ph: (0 ) _____
	Address:	_____	Work Ph: (0 ) _____
		_____	Mobile Ph: _____
		_____	Fax: (0 ) _____
	Relationship to Applicant:	_____	Email: _____

PROFESSIONAL MEMBERSHIPS
Please give details below of any professional groups you belong to:



Have you been convicted of a driving offence which results in temporary or permanent loss of licence, or imprisonment?		
Are you awaiting sentencing/currently have charges pending?		
Have you been the subject of any concerns involving student safety?		

### DECLARATION

**I certify that the information provided is correct and no relevant material/information has been omitted. I also declare that to the best of my knowledge and belief the information given in this application and in my CV is correct. I also understand that if I have supplied incorrect or misleading information, or have omitted any important information, I may be disqualified from the appointment, or if appointed, may be liable to be dismissed.**

**Applicant's Signature:**

**Date:**

*This information will be used for the purposes of processing this application and any review that may result from an appointment. Please note that if you give any incorrect or misleading information or have omitted any important information during the appointment process, you may be disqualified from consideration or, if appointed, be liable for dismissal.*

### PRIVACY ACT 2020

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 Botany Downs School Appointment Committee to make enquiries of my present or past employers or colleagues or any other person who may assist in establishing my suitability for a teaching position at Botany Downs School.

I also authorise the School Board or nominated representative, permission to access any information held by the Teaching Council of Aotearoa NZ, including matters under investigation, to gather information related to my suitability for appointment to the position.

**Applicant's Signature:**

**Date:**