



## APPLICATION FOR APPOINTMENT

- A. **Application for Appointment to the position of** Teacher of Physical Education/Pasifika Studies Fixed Term, Part Time  
(Possibility of additional hours  
Please state other subjects)

as advertised in Education Gazette / College Website on 26 March 2024

*Please complete this cover sheet and attach to your Curriculum Vitae*

**Note: Your application should reach the College by:** 9 April 2024 @ 3pm

### B. Personal Details:

Surname \_\_\_\_\_ First Name \_\_\_\_\_  
Full Postal Address \_\_\_\_\_  
Contact Phone No. Private \_\_\_\_\_ Business \_\_\_\_\_  
Cell-phone No. \_\_\_\_\_ E-mail \_\_\_\_\_  
Previous name if used in teaching \_\_\_\_\_

### C. Registration Status: (Please tick appropriate boxes)

Full registration  [ ] Provisional  [ ] (**Attach copy of Registration card**)  
Subject to Confirmation  [ ] Not Registered  [ ] (**Expiry date:** \_\_\_\_\_)

### D. Present Teaching Position

School \_\_\_\_\_ Date Appointed \_\_\_\_\_

Nature of present position (tick appropriate boxes)

Permanent  Part-time  Full-time  Relieving   
Other  (Please specify) \_\_\_\_\_

### E. One highlight from your total work experience:

\_\_\_\_\_

**NOTE:** Please ensure that your Curriculum Vitae contains details of:

- i Qualifications including conferring authority and year obtained
- ii Teaching Service, including name of school(s) year(s) and subjects taught
- iii Special duties performed, and responsibilities undertaken
- iv Co-curricular activities
- v Involvement in subject associations, teacher organisations etc
- vi Non-teaching work experience (paid/unpaid), including special goals, experience, strengths
- vii. Please include with your application a copy of your Passport**
- viii. Please include with your application a copy of your Driver's License.**

### F. Health:

What is your present state of health? \_\_\_\_\_

Have you had any significant time off for sickness of any kind in the past five years? If so, please specify.  
(Medical Certificate may be supplied)

\_\_\_\_\_  
\_\_\_\_\_

**G. Experience in Special Character of Catholic School:** Villa Maria College is an Integrated State School. The Special Character of Villa Maria College is that it is a Roman Catholic School for Girls. Please read the information sheet “The Character of the Catholic School” enclosed.

**H. Referees:** Please nominate three referees who will supply confidential reports to our Board .

1	<i>Dr/Mr/Mrs/Ms/Miss</i>	Initials _____	Surname _____	Position _____
Address: _____				
Telephone		(Private) _____	(Business) _____	
		(email) _____	(Fax) _____	

  

2	<i>Dr/Mr/Mrs/Ms/Miss</i>	Initials _____	Surname _____	Position _____
Address: _____				
Telephone		(Private) _____	(Business) _____	
		(email) _____	(Fax) _____	

  

3	<i>Dr/Mr/Mrs/Ms/Miss</i>	Initials _____	Surname _____	Position _____
Address: _____				
Telephone		(Private) _____	(Business) _____	
		(email) _____	(Fax) _____	

**I.**

Have you ever been charged or convicted of any offence against the law or charged in the Youth Court under your current name or previous name/s used?	<b>YES/NO</b>
Do you know of any reason why you should not be employed at Villa Maria College?	<b>YES/NO</b>
Have you ever been under competency or discipline proceedings?	<b>YES/NO</b>
Have you ever been dismissed from a teaching position?	<b>YES/NO</b>
<p>➤ <b>I have read the information sheet “The Character of the Catholic School” and understand the commitment it involves</b></p> <p>➤ <b>I give permission for Villa Maria College to seek information about my employment record and personal background from my current and previous employers including my nominated referees</b></p> <p>➤ <b>I solemnly and sincerely declare that to the best of my knowledge and belief the information given is true and correct.</b></p>	
Signed: ( <i>Applicant</i> ) _____ Date: _____	

1.	<b>Purpose for which the information is collected</b> The information is collected for staff selection purposes.
2.	<b>Storage.</b> The information is held at Villa Maria College, 21 Peer Street, Christchurch. It is accessible to members of the Appointments Committee only.
3.	<b>Access to and correction of information.</b> At any time, you may request access to the information, and you may request correction of the information.
Signed: ( <i>Applicant</i> ) _____ Date: _____	