

DUNEDIN RUDOLF STEINER SCHOOL

APPLICATION FOR EMPLOYMENT

Please return with your Curriculum Vitae and a covering letter to:

The Executive Officer, Dunedin Rudolf Steiner School
1 Fern Road, Maia, Dunedin, 9022

Email: office@dunedin.steiner.school.nz

Please answer every section of this seven page form.

Position title:	TEACHING PRINCIPAL
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Family Name:			
First or Given Names:			
Preferred Name:			
Title:	Miss / Ms / Mrs / Mr	Other (please state):	

PERSONAL DETAILS			
Full Postal Address: <i>City</i> <i>Postcode</i> <i>Country</i>			
Email:			
Daytime Phone No.:		Mobile:	
Home Phone No.:		Fax:	

If your application is successful when could you start?	
How did you find out about this position? (If a publication, please tell us its name)	

LEGAL ENTITLEMENT TO WORK IN NEW ZEALAND			
Are you a New Zealand Citizen/Permanent Resident or Australian Citizen?	Yes / No		
If not, do you have a current Work Permit?	Yes / No	Expiry Date:	

Note: If you are successful in your application you will be required to have the appropriate work permit before starting work.

TEACHING QUALIFICATIONS AND EXPERIENCE

Teaching qualification details: <i>Name</i> <i>Institution</i> <i>Country</i> <i>When</i>	
Are you a “New Zealand registered teacher”?	Registered / Provisionally registered / No
Ministry of Education number: (if relevant)	
Details of previous teaching experience ?	
Description: <i>Age taught</i> <i>Institution</i> <i>Country</i> <i>When</i>	
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	TEACHING QUALIFICATIONS AND EXPERIENCE - continued
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Description: <i>Age taught</i> <i>Institution</i> <i>Country</i> <i>When</i>	
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Do you have any leadership experience?	Yes / No
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If yes, Description: <i>What</i> <i>Institution</i> <i>Country</i> <i>When</i>	
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If yes, Description: <i>What</i> <i>Institution</i> <i>Country</i> <i>When</i>	
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STEINER QUALIFICATIONS AND EXPERIENCE	
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Do you have any Steiner qualifications ?	Yes / No
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If yes, Description: <i>Name</i> <i>Institution</i> <i>Country</i> <i>When</i>	
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Do you have any Steiner teaching experience ?	Yes / No
If yes, Description: <i>Age taught</i> <i>Institution</i> <i>Country</i> <i>When</i>	
If yes, Description: <i>Age taught</i> <i>Institution</i> <i>Country</i> <i>When</i>	

HEALTH AND SAFETY

The following information is required to help us to meet our obligations under the Health and Safety in Employment Act 1992 and subsequent amendments and the Injury Prevention Rehabilitation and Compensation Act 2001, and to assess your ability to perform the duties of the position safely.

*It is important that you let us know of any health issue or disability that you have that is relevant to the role you are applying for. If you require special services or facilities, and it is reasonable for us to supply these, then we will work to accommodate you. **Letting us know that you have a medical condition or disability will not exclude you from being considered for the position.***

Do you suffer from or have you suffered from any injury or medical condition caused by gradual process, disease or infection (e.g. back injury, hearing loss), which the tasks listed in the job description may aggravate or contribute to?	Yes / No
If "Yes" please provide details:	
Have you any other injury or medical condition that may affect your ability to effectively and safely carry out the functions and responsibilities of this position?	Yes / No
If yes, please provide details. Also detail any technical aids, equipment or adaptations to the workplace that would increase your ability to perform the requirements of the role.	

REFEREES

Please provide the names and contact details of three referees whose consent has been obtained and who may be contacted for a confidential reference. (Where possible at least two of these referees should be previous employers and have supervised or been senior to you in your current or most recent employment).

Name:			
Relationship: <i>(e.g. Manager)</i>			
Position & Organisation:			
Address: <i>City</i> <i>Postcode</i> <i>Country</i>			
Telephone no:		Fax no:	
Email Address:			

Name:			
Relationship: <i>(e.g. Manager)</i>			
Position & Organisation:			
Address: <i>City</i> <i>Postcode</i> <i>Country</i>			
Telephone no:		Fax no:	
Email Address:			

Name:			
Relationship: <i>(e.g. Manager)</i>			
Position & Organisation:			
Address: <i>City</i> <i>Postcode</i> <i>Country</i>			
Telephone no:		Fax no:	
Email Address:			

CREDENTIAL CHECKING

For the purposes of reference checking I give my consent for the Dunedin Rudolf Steiner School to communicate and obtain information about me from the institutions included in this application form or my Curriculum Vitae in order to confirm my qualifications.

Signature		Date	
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CRIMINAL OFFENCES

As an educational institution those working within the School are placed in positions of trust. Therefore please answer the following questions.

Have you been convicted or discharged without conviction as a result of criminal charges in New Zealand (<i>excluding those convictions protected from disclosure by the Criminal Records [Clean Slate] Act 2004</i>) or any other country?	Yes / No
Are there any charges pending against you?	Yes / No
If you answered "Yes" to either or both of the above questions, please provide details:	

Note: *For certain positions an additional police vet will be carried out before the preferred candidate will be offered the position. This will be done with the consent of the candidate.*

DECLARATION

I declare that the above information and any attachments that I have provided in applying for this position are complete, accurate and correct, and I have not omitted any information that would affect the decision to employ me.

Privacy Act – this application is submitted on the understanding that any information given is for the use of the Dunedin Rudolf Steiner School. I agree to the Board of Trustees (or its agents), approaching my referees regarding my suitability for this position. Furthermore consent is given to the Board of Trustees to make enquiries of my current or past employers or colleagues or any other person who may assist in establishing my suitability at this school.

Signature of Applicant:		Date	
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CHECKLIST:

Application form completed	o
Covering letter	o
Curriculum Vitae	o

Please do not send original documents. Documents cannot be returned.

Please also complete the Application Acknowledgement section on the next page.

APPLICATION ACKNOWLEDGEMENT

We like to acknowledge all applications in writing. An acknowledgement of your application will either be posted or e-mailed to you according to your instructions.

Option 1

Please complete the Applicant Return Form at the bottom of this page if you would like an acknowledgement of your application to be *posted* to you. We will return this portion to you.

Option 2

If you prefer that your application is acknowledged by *e-mail* (at the address supplied on the first page of this application form) please indicate this by ticking the box below.

Please acknowledge my application by e-mail

NOTES TO APPLICANTS

When applications close, a shortlist of candidates to interview will be chosen and interviews will be arranged.

If invited to attend an interview, you may bring whanau or support people to the interview. If you wish to do so please indicate this in your covering letter. Any associated costs will be borne by yourself.

Applicants who are not selected for interview will be informed in writing as soon as practicable.

APPLICANT RETURN FORM

The Administrator
Dunedin Rudolf Steiner School & Kindergarten
1 Fern Road
Maia
DUNEDIN

**PLEASE FILL IN ALL
DETAILS BELOW**

Name:		Dear Applicant Thank you for applying to the Dunedin Rudolf Steiner School for the vacancy named below. Your application has been received. A further letter regarding the outcome of your application will be sent in due course.
Address: <i>City</i> <i>Postcode</i> <i>Country</i>		
Position:	Teaching Principal	