### Application for Appointment St Mark's School



# IMPORTANT NOTES FOR APPLICANTS NON-TEACHING STAFF

Thank you for applying for a position at St Mark's School. Please ensure you have a copy of the job description and person specifications before completing this application.

- 1. Please fully complete this form personally. Read it through first then answer all questions and make sure you sign and date where indicated on the last page.
- 2. Attach a curriculum vitae (CV) containing any additional information. If you include written references, please note that we may contact the writers of the references.
- Copies only of qualification certificates should be attached. If successful in your application you will be required to provide originals as proof of qualifications and two photographic forms of ID, such as a Passport and Drivers Licence.
- 4. If you are selected for an interview you may bring whānau/support people at your own expense. Please advise if this is your intention.
- 5. Failure to complete this application and answer all questions truthfully may result in any offer of employment being withdrawn or appointment being terminated if any information is later found to be false.
- 6. Shortlisted applicants (for non-teaching positions) will be asked to give consent to a police vet. It is a requirement in the Education Sector for all employees and contractors to be vetted. Teaching staff are police vetted as part of their registration process.
- 7. The application form contains questions about any previous criminal convictions. In some specific situations, the Criminal Records (Clean Slate) Act 2004 allows to not disclose your convictions, but **only** if **ALL of the following criteria** are met. You must:
  - a. have no convictions within the last 7 years;
  - b. never have been sentenced to a custodial sentence (e.g. imprisonment, corrective training, borstal);
  - c. never have been ordered by a Court during a criminal case to be detained in a hospital due to his/her mental condition, instead of being sentenced;
  - d. not have been convicted of a "specified offence" (e.g. sexual offending against children and young people or the mentally impaired). Contact the Ministry of Justice for a full list;
  - e. have paid in full any fine, reparation or costs ordered by the Court in a criminal case;
  - f. never have been indefinitely disqualified from driving under section 65 Land Transport Act 1998 or earlier equivalent provision.
- 8. This application form and supporting documents will be held by the school. You may access it in accordance with the provisions of the Privacy Act 2020.

Please return the completed Job Application Form (all pages) and documents to: <a href="mailto:hrsmcs@st-marks.school.nz">hrsmcs@st-marks.school.nz</a>
If you have any gueries, please contact the Principal – Kent Favel.

#### **OFFICE USE ONLY**

This page must be retained on file as part of the application; it must not be removed or destroyed.

Initial and Date:	
(I confirm I have read and understood this page of Note	s)

# Job Application Form (Non-Teaching Staff)



### TO ACCOMPANY CURRICULUM VITAE

Thank you for your interest in working at St Mark's School. The information you provide in this application form, in your CV and cover letter will be used to decide whether or not you will be shortlisted for an interview.

Personal Details			
First Name:		Middle Name:	
Surname:		Preferred Title	
Have you ever been known by another name? If yes, please give details.			Yes / No
Position Applying for:			
Day Phone Number:		Evening Phone Number:	
Cell Phone Number:			
Address:		Drivers Licence Number:	
		Place of Birth:	
About You			
Qualifications: (please list any relevant to the position. Attach copies)			
Employment History (if a	ny) for the last 5 years:		
Name of Employer	Position & Location	Date	s of Employment
(Continue on separate page if necessary – please also explain any gaps in employment history in the last 5 years)			

Date/

**Notice Period:** 

Availability: Date available to start at St Mark's School or period of

notice required in current employment

Are you a New	Zealand Citizen?		Yes / No
-	ave permanent residency or holestatus, Visa or other document	d a current work visa? (Note: we will is prior to employment)	need to view and keep a copy
Туре:		Expiry Date:	
•	conflict of interest (either perso th St Mark's School? If yes, ple	nal or business) which may impact on ease give details:	your Yes / No
Do you have a details:	ny criminal convictions in New 2	Zealand or in any other country? If yes	s, please give
Has any charge give details:	e you have been faced with bee	n the subject of a diversion scheme?	If yes, please Yes / No
Are you awaitir please give de		criminal charges pending against you	? If yes, Yes / No
Have you beer	the subject of any concerns in	volving student safety? If yes, please	gtive details. Yes / No
		ere any other factors that we should k lity to do the job? If yes, please give of	Yes / No
Do way agree t	o us requesting a Police Check		Yes / No

### **General Health Issues**

This Health and Safety Questionnaire is designed to ensure that your general health is not likely to adversely affect, or be adversely affected by the tasks that your proposed job with St Mark's School will require of you.

These include health problems or disabilities that may directly affect your ability to perform the tasks required of you in your proposed job.

A positive answer to any of these questions does not mean that you will not be considered for this job, but may require us to check that this problem is minor and not likely to affect your work ability, or to cause work to give you health problems. We may need to adapt your work or work-place to ensure that no health problems are aggravated or induced.

Do you now, or have you in the past, suffered from any of the following health problems: (circle yes or no and provide details if relevant)

Vision difficulties or eye problems	Yes / No
Hearing difficulties or ear problems	Yes / No

Any other health issue that could affect your ability to work? If yes, please give details:	Yes / No
Any specific learning difficulty (such as dyslexia or dyspraxia)?	Yes / No
Have you had any injuries to your back, neck or spine? If yes give, please give details	Yes / No
Have you had a medically diagnosed occupational overuse syndrome (OSS) injury? If yes, what was the injury and has it been resolved?	Yes / No
Have you now, or in the past, suffered and had medical attention for stress? If yes, please give details:	Yes / No
Do you have any health problems or illness for which you are likely to need time off work within the next 6 months? If yes, please give details:	Yes / No
Have you ever had a work related ACC claim and has it been resolved? If yes, please give details:	Yes / No

## **Employee Health and Safety Issues and Emergency First Aid**

The following questions are to ensure fellow workers can use proper first aid techniques.

Do you have any illness or health problem that could cause a sudden and worrying change in your health at work and that may require prompt co-employee assistance?

Epilepsy, fits or seizures	Yes / No
Insulin dependent diabetes and low blood glucose which may cause sudden collapse	Yes / No
Severe allergic reaction which may cause breathing or swallowing difficulties	Yes / No

Referees			
As part of the application proceed recent positions. If you have in that we may contact the writers	cluded written references from of these references. Please li	n people other than those red st your referees.	
Are we able to contact your cur	rrent employer?	Yes/No	
Name	Position	Employer	Contact Telephone
I authorise the Board, or nomin names I have supplied to gathe		•	Yes / No
I authorise the Board, or nomin Education Council, including m for appointment to the position.	atters under investigation, to g	· · · · · · · · · · · · · · · · · · ·	-
Declaration			
I,this application form are correct	t and I understand that:	are to the best of my knowle	
If any false or misleadii     am employed I may be	ng information is given, or any	material fact suppressed, I m	ay not be accepted, or if
<ul> <li>I give permission for Si is not authorised to spe or an alternative suital details as required to c</li> <li>I understand that if I ar a criminal check to be</li> <li>The health information adversely affected by, for the School to disclo</li> </ul>	t Mark's School to contact the eak on the employer's behalf, or only authorised person as cover the necessary employment offered employment I may be completed and agree to particular gathered in this form will encor adversely affect the tasks these this information to its medical understand I have certain right.	r not available, enquires can be agreed with me. I will also so not history period advised by some asked to complete relevant pate in this process.  Table St Mark's School to ensure the proposed job may requal advisor and/or to its accidental advisor and/or advisor	be made with the manage supply any further referee of Mark's School. It documentation to enable sure my health will not be uire of me. I also consenent insurer.
held by St Mark's Scho corrected.	ool. If I do not agree with mat	erial kept by St Mark's School	ol, I may ask for this to be

NB: If successful in gaining employment, this information will be held on your personal file for the period of

Date:

your employment with St Mark's School and for an additional 7 years after your termination date.

Signature: