

## Application Form – Head Teacher/Centre Manager

**Late or incomplete applications will not be accepted.**  
 Emailed applications are preferred, submit to: [vacancies@rka.org.nz](mailto:vacancies@rka.org.nz)

- This form will be retained in a secure location for one year.
- Should you be invited to interview, please bring original or certified copies of your qualifications, proof of eligibility to work e.g. passport, birth certificate, work visa, driver's license, proof of address and proof of name change or marriage certificate if your surname does not match ID.
- A full application is required for each position. Please include CV and covering letter. Application submitted up to 6 months previously can be transferred to new vacancies.

Applicant Details

Full Name:

Former Name, if any:

Home Address:

Home Phone Number:

Mobile Phone Number:

Email:

Where did you hear about this role?

Position

Please provide details of the position you are applying for:

Kindergarten/ELC Service:

Position:

Teacher

Registration

Full  STC  PRT

Number:

Date

Expiry

Issued:

Date:

Current First Aid

Certificate:

Yes

No - if no, date expired:

Qualifications

Name of Early Childhood

Qualification(s):

Date Qualification

Issuer of

Issued:

Qualification:

Name of Post Graduate

Qualification(s):

Date Qualification

Issuer of

Issued:

Qualification:

Name of any other

Qualifications:

Date Qualification

Issuer of

Issued:

Qualification:



Association/  
Employer:

From  
(month/year):

**Past teaching positions held:**

Position 2:  FT  PT  RE

Kindergarten/  
Centre:

Association/  
Employer:

From To  
(month/year): (month/year):

Reason for  
Leaving:

Position 3:  FT  PT  RE

Kindergarten/  
Centre:

Association/  
Employer:

From To  
(month/year): (month/year):

Reason for  
Leaving:

Position 4:  FT  PT  RE

Kindergarten/  
Centre:

Association/  
Employer:

From To  
(month/year): (month/year):

Reason for  
Leaving:

Total number of years and months employed in **permanent Kindergarten positions:**

Senior Teacher: Head Teacher/Centre Manager: Teacher:

Total Number of years and months employed in other **permanent early childhood positions:**

Senior Teacher: Head Teacher/Centre Manager: Teacher:

Total number of years and months employed in **continuous relieving positions** (≥ six weeks):

Employment History – For at least the previous 5 years

Length of Teaching Service









Are you awaiting hearing of any other charges that Police may be considering laying against you?

Yes  No

If yes, please provide brief details:

Do you have any disabilities or physical or cognitive conditions which:

- May prevent or restrict you from performing any aspect of the job for which you are applying
- May require specific accommodation by the employer or other staff to enable you to perform the job for which you are applying
- May have an impact on the health and safety of yourself, other employees, the children or parents attending the place of work

Yes  No

If yes, please provide brief details:

Health

Do you have the right of permanent residence in New Zealand or a valid work permit?

Yes  No

If yes, please provide details:

General

Do you intend to engage in other paid work whilst in this position?

Yes  No



Have you at any time taken action against an employer to resolve an employment issue, including personal grievance action or other?

Yes  No

If yes, please provide details:

You may arrange for the provision of one referee report from a person able to provide comments on your **professional work**. Referee report forms are available from the RKA, or online at [www.ruahinekindergartens.co.nz](http://www.ruahinekindergartens.co.nz) and should be forwarded directly to your nominated referee with an envelope stamped and address to the HR and Events Coordinator at the RKA Central Office. Please note that you are also required to complete part of the form.

Subject to the approval of the referee concerned, referee report forms will be held on file at the Central Office for a maximum of twelve months. They may, at your request, be used for any subsequent application to the RKA. It is your responsibility to ensure that previous referee reports are held on file at the Central Office when making an application for a particular vacancy.

Name of referees to be used in support of this application, one written, two verbal (please indicate whether these are currently held on file).

1.  Yes  No

2.  Yes  No

3.  Yes  No

Please indicate whether you want the attachments to this application form held on file for a maximum of twelve months, in order that they can be used to support any future applications for vacancies of a similar nature:

Yes  No

Please indicate your consent to the collection of personal information in support of this application:

I, \_\_\_\_\_, (*please write your full name*) hereby authorise the collection of personal information from any current or previous employer, training establishment or other agency or individual, for the purpose of determining my suitability for the Kindergarten/ELC position for which I am applying, without further reference to me.

Please specify below any agency or individual to whom you **do not** wish an approach to be made in relation to this application. **Note – your authority is required in accordance with the provisions of the Privacy Act 1993.**

Referee Reports

Personal Information Disclosure

Please note that incorrect or misleading information, or the omission of important information, may disqualify you from appointment or, if appointed to the position, may make you liable for dismissal.

I certify that to the best of my knowledge all information provided in this application is true and correct.

Name:

Signature:

Date: