

DECLARATIONS

1 Have you ever been convicted of a criminal offence in New Zealand or overseas or otherwise know of any reason why you should not be employed to work in the school environment?

Yes

No

2 Do you have any known condition, injury or illness that may affect your ability to carry out the duties and responsibilities outlined in the position description?

Yes

No

If you have answered "Yes" to either of these questions, please attach any comment or clarification that you would like to make. You may be asked to provide correct and true details or copies of relevant records if you answered "Yes". (Failure to provide true and correct details of a conviction or criminal offence for reason of position unsuitability, will make you liable to dismissal should you be the successful applicant. Failure to provide true and correct information about your medical history may result in loss of entitlement to any compensation from ACC or the Board's workplace accident insurer).

"I, _____ declare that to the best of my knowledge the answers in this application form and the information provided in my curriculum vitae are correct and I understand that if any false or misleading information is given, or any material information suppressed, I will not be employed, or if I am employed, my employment will be terminated.

Signed: _____ Date: _____

PRIVACY ACT

1 **Purpose for which the information is collected:**

The information is collected for staff selection purposes. Please contact the school if you have any difficulty with the form.

2 **Storage:**

The information is held at Hutt Valley High School. It is accessible by senior administration staff.

3 **Access to and correction of information:**

At any time you may request access to the information, and you may request correction of the information.

I authorise Hutt Valley High School to seek information about my employment record and personal background from any of my nominated referees, former employers, Teachers' Registration Board and Police and I understand that this information will be treated in complete confidence. This shall act as sufficient discharge to the above organisation and people on release of any relevant information.

Signed: _____
(applicant)

Date: _____