

Candidate Application Form

Please send us this form with your CV, cover letter, and a copy of photographic ID

The information that you provide on this form is covered by the Privacy Act 2020 and will only be used for selection and recruitment purposes. Information obtained from referees is also covered by the Privacy Act 2020. All information will be kept confidential. This information may be corrected at any time by you.

This application form provides for you to give consent for ERO to conduct all pre-employment checks, including referee checks, and the serious misconduct check

If you require assistance with completing this form, or any part of the recruitment process please contact human.resources@ero.govt.nz

Position applied for				
Location of position				
·				
How did you learn of this vacancy?		If yes, when and what role		
Have you worked for ERO before?		ii yes, when and what fole		
Personal information				
Name				
Telephone				
Email				
What is your nationality?				
Are you legally entitled to work in New Zealand?	□ NZ Citizen If applicable, pless □ NZ Permanent Resident □ Australian Citizen/Permanent Resident □ Valid work permit □ No work permit	se attach a copy to this form		
B'l.				
Disclosures All successful candidates will undergo a criminal history background check, via the Ministry of Justice or the Police Vetting Service. The Criminal Records "Clean Slate" Act 2004 gives people the right, if they meet set conditions, to withhold information about their past criminal convictions. If you are uncertain if this applies to you, please refer to the Police Vetting website. All ERO staff are re-vetted every three years. Have you ever been convicted of a criminal offence in NZ or any other country? Yes \(\) No \(\)				
Have you ever been convicted of a criminal offence in NZ or any other country? Are you awaiting sentencing, or do you have charges pending?		Yes 🗆 / No 🗆		
Have you ever been discharged without conviction for an offence?		Yes 🗆 / No 🗆		
If you have answered 'Yes' to any of the above questions, please provide details below				
	equired to observe the ERO Code of Conduct. You car	Yes □ / No □		
read the code here . Do you have any issues in complying with this code? Are you aware of any possible conflicts of interest that may arise if you are appointed to this position in terms of the above statement? Yes Yes Yes		is Yes 🗆 / No 🗆		
Are you a current member of a school board of trustees or involved in the management of an early childhood education service? (Note – if you are appointed you will be unable to continue your involvement)				

Do you have secondary employment which you would wish to continue should you be Yes 🗆 / No 🗆					
appointed to t	he position?				
If you have an	swered 'Yes' to any of the above questions	s, please provide details below			
References					
	the name and contact detail of three ref	erees. One referee must be your curr	ent or most recent		
•	will inform you prior to contacting your r	•			
Name					
Telephone					
Name					
Telephone					
Name					
Telephone					
•					
Have you worked for a Public Service Department or		If ye	s, please give brief details		
statutory Crown entity within the last 3 years?					
If you have prev	iously worked for a Public Service Department	or statutory Crown entity, please complet	e this section –		
_					
Do you consent to the disclosure to ERO of whether you have been subject to a serious misconduct					
investigation, either concluded and upheld or currently under investigation, from all Public Service and					
•	statutory Crown entity employers for the last three years? This will usually be conducted at the preferred				
candidate sta	age.				
☐ Yes, I consent					
□ No, I do not consent					
☐I would like to discuss this before it is undertaken*					
			C. II		
*Note that in this case the agency will need to separately document the candidate's consent following that					
discussion					
REVIEW OFFIC	EPS ONLY				
	eachers Registration Number?				
wriat is your i	eachers Registration Number:				
Do you hold a	current Practising Certificate from the	If Yes, please	attach a copy to this form		
	cil of Aotearoa NZ?		.,		
(If yes, state ex					
Do you have a full current drivers' license?		If Yes inlease	attach a copy to this form		

REVIEW OFFICERS ONLY	
What is your Teachers Registration Number?	
Do you hold a current Practising Certificate from the	If Yes, please attach a copy to this form
Teaching Council of Aotearoa NZ?	
(If yes, state expiry)	
Do you have a full, current drivers' licence?	If Yes, please attach a copy to this form
Do you have any current or pending demerit points or	If yes, please give brief details
drivers license restrictions (including convicted traffic	
offences)?	
Having read the position statement, and noting	If yes, please give brief details
aspects of the role such as level of travel, and	
requirement to work in schools and early childhood	
centres; do you have any impairments, injuries or	
conditions that may effect your ability to perform the	
role, or that the job may adversely contribute to?	

Please note – if you are appointed as a Review Officer, you will be required to drive, and your driving will be professionally assessed every 2 years.

Please note – As part of the recruitment and selection process ERO may undertake checks including – criminal history, visa checks, psychometric tests, and qualifications checks.

Peclaration Peclaration
 certify that: I consent to my referees to be contacted (<i>The recruitment team will inform the candidate before contact is made with any referees</i>) The information I have supplied is given voluntarily and is, to the best of my knowledge true, accurate and complete. I understand that if I have supplied incorrect or misleading information, or have omitted any important information, I may be disqualified from appointment, or if appointed, my employment may be terminated.
ignature
Date