# TRIDENT HIGH SCHOOL BOARD OF TRUSTEES

APPLICATION FORM
Science Laboratory Technician
Fixed Term - Part Time
2/2/2021 - 10/12/2021

#### **INSTRUCTIONS**

Please complete this application form.

In addition provide a cover letter, your CV and preferably include a recent photo.

Ensure all documentation is returned to the Principal's PA <a href="mailto:bendiksonL@trident.school.nz">bendiksonL@trident.school.nz</a>
OR if you wish to contact the Principal <a href="mailto:Principal@trident.school.nz">Principal@trident.school.nz</a>
Trident High School <a href="mailto:Arawa Road">Arawa Road</a>
Whakatane 3120

Adrienne Scott-Jones B.A (Hons) P.G.C.E. **Principal** 

### **APPOINTMENT PROCESS**

12/11/2020: Vacancy advertised

Monday 30 November, 2020: Applications close – all documentation

related to the application (Cover letter, application form, CV, and referee's reports) must be completed and with the Principal.

## TRIDENT HIGH SCHOOL BOARD OF TRUSTEES



Principal: Mrs Adrienne Scott-Jones

Phone: 07 308 8159

Email: <a href="mailto:principal@trident.school.nz">principal@trident.school.nz</a>

Trident High School Arawa Road Whakatane

Applica	ation for the positi	on of Science Lab Technicia	n		
Title: Mr/ Mrs/ M	liss/ Ms		Gender:	M F circ	:le
Surname:	•	First Name:			
		Preferred Name (If	Different):		
Postal Address:					
Phone:	Cell:	Email:			
Highlight or tick boxe	es.				
Personal Details					
Birth Date: /	/				I
				Yes	No
	convicted of a crimina e further information o	Il offence (other than a minor tra In a separate sheet.	ffic offence)?		
effectively carry out	•	n or any other condition that cou sibilities of the position? In a separate sheet.	d affect your ability to		
Do you smoke?		·			
How many days abser	nce in your last 12 month	s of employment were due to sickne	ess, injury and/or accident?		
			1000	0 20	
0-2 days	3-5	6-10 11-15	16-20	Over 20	) days
		6-10   11-15 ormation on a separate sheet.	16-20	Over 20	) days
If more than 10, plea	ase provide further info	7 -7	16-20	Over 20	) days
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## **Qualifications and Training**

Educational qualifications (Degrees, Diplomas and other significant awards, etc):

Tertiary Qualifications Awards, etc	Institution	Year completed	Major

Expand boxes or Insert other rows as required

## **Work History:**

Please list all work experience, detailing any teaching or management responsibilities.

Start with the most recent, i.e. your current position.

Position	School and location	Teaching Subjects And Levels	Management Responsibilities	Date (from / to)

Expand boxes or Insert other rows as required

SUITABILITY FOR POSITION: Please provide information and evidence of your suitability for the position.			
Expand boxes if necessary.			
Provide evidence of your suitability for this position. (Do not state "see CV".)			
In what areas will you require support and/or further development?			

Name Position Phone Cell Email Name Position Phone Cell Email Same Position Phone Cell Email  Name Position Phone Cell Email  Name Position  Phone Cell Email  Name Position  Phone Cell Email  Name Position Phone Cell Email  Same Position Phone Cell Email  I grant permission for the Board of Trustees to ask people, other than those stated in the referees section above, about my suitability for the position:    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 information suppressed, I will not be employed, or if I am employed, my employment will be terminated. By signing this form or sending it through digitally to apply for a position indicates that it will become part of my contract if employed – this is especially pertinent re involvement in co-curricular activities.  Signed:	REFEREES (3 requ	ired):				
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Date:	Signed:					
	Date:					

NOTE: For email purposes your name will represent and carry the weight of your signature.